

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011573

FILED
Mar 15, 2009
Secretary of State

Entity Name: I. JOHNSON AND SONS DAIRY, LLC

Current Principal Place of Business:

17731 168TH STREET
LIVE OAK, FL 32060

New Principal Place of Business:

Current Mailing Address:

17731 168TH STREET
LIVE OAK, FL 32060

New Mailing Address:

FEI Number: 83-0423450 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, IMOGENE
17901 168TH STREET
LIVE OAK, FL 32060 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JOHNSON, ROY L SR.
Address: 17901 168TH STREET
City-St-Zip: LIVE OAK, FL 32060

Title: MGR () Delete
Name: JOHNSON, IMOGENE
Address: 17901 168TH STREET
City-St-Zip: LIVE OAK, FL 32060

Title: MGR () Delete
Name: JOHNSON, TIMOTHY F
Address: 16420 165TH ROAD
City-St-Zip: LIVE OAK, FL 32060

Title: MGR () Delete
Name: JOHNSON, MICHAEL T
Address: 17731 168TH STREET
City-St-Zip: LIVE OAK, FL 32060

Title: MGR () Delete
Name: JOHNSON, ROY L JR.
Address: 16077 169TH ROAD
City-St-Zip: LIVE OAK, FL 32060

Title: MGR () Delete
Name: JOHNSON, JAMES D SR.
Address: 16806 165TH ROAD
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: IMOGEN JOHNSON

MGR

03/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date