

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031859

FILED
Mar 03, 2009
Secretary of State

Entity Name: BEER FAMILY GROUP LLC

Current Principal Place of Business:

PO BOX 158
LABELLE, FL 33975

New Principal Place of Business:

5998 SEARS RD
LABELLE, FL 33935

Current Mailing Address:

PO BOX 158
LABELLE, FL 33975

New Mailing Address:

FEI Number: 20-2596809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEER, BRYAN
1021 RIVER ROAD, C/O BOX 158
LABELLE, FL 33935 US

Name and Address of New Registered Agent:

BEER, BRYAN
1021 CR 78, C/O BOX 158
LABELLE, FL 33935 US

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:

03/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: A & B HARVESTING,
Address: PO BOX 158
City-St-Zip: LABELLE, FL 33935

Title: MGR () Delete
Name: BEER, BRYAN
Address: 1021 RIVER ROAD
City-St-Zip: LABELLE, FL 33935

Title: MGRM () Delete
Name: BEER FAMILY GROVES P, ARTNERSHIP
Address: PO BOX 158
City-St-Zip: LABELLE, FL 33975

Title: MGRM () Delete
Name: BEER, VICTOR
Address: PO BOX 158
City-St-Zip: LABELLE, FL 33975

Title: MGRM () Delete
Name: NEMITZ, DEBRA
Address: PO BOX 158
City-St-Zip: LABELLE, FL 33975

Title: MGRM () Delete
Name: STOLLER, BRENDA
Address: 306 SPRING WALK
City-St-Zip: PEACHTREE, GA 30269

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: A & B HARVESTING,
Address: PO BOX 158
City-St-Zip: LABELLE, FL 33975

Title: MGR (X) Change () Addition
Name: BEER, BRYAN
Address: 1021 CR 78
City-St-Zip: LABELLE, FL 33935

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
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: BRYAN BEER

MGR

03/03/2009

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