

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110875

Entity Name: CFC SPECIALTIES, LLC

FILED
Apr 03, 2007
Secretary of State

Current Principal Place of Business:

8900 HWY. 90 WEST
DEFUNIAK SPRINGS, FL 32433

New Principal Place of Business:

47 SOUTH 3RD STREET
DEFUNIAK SPRINGS, FL 32435

Current Mailing Address:

PO BOX 1644
DEFUNIAK SPRINGS, FL 32435

New Mailing Address:

47 SOUTH 3RD STREET
DEFUNIAK SPRINGS, FL 32435

FEI Number: 71-0994079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOUNTAIN, JAMES C
8900 HWY. 90 WEST
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

FOUNTAIN, JAMES C
47 SOUTH 3RD STREET
DEFUNIAK SPRINGS, FL 32435 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: JAMES C FOUNTAIN

04/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FOUNTAIN, JAMES C
Address: PO BOX 1644
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FOUNTAIN, JAMES C
Address: 47 SOUTH 3RD STREET
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

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: JAMES C FOUNTAIN

MGRM

04/03/2007

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