

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016632

FILED
Jan 16, 2009
Secretary of State

Entity Name: LEWIS GAINESVILLE BULK PLANT, LLC

Current Principal Place of Business:

621 SE DEPOT (7TH) AVENUE
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1282
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 20-4634319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, JUALENE O
621 SE DEPOT (7TH) AVENUE
GAINESVILLE, FL 32601 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: LEWIS, JUALENE O
Address: 2802 N.W. 4TH LANE
City-St-Zip: GAINESVILLE, FL 32607

Title: VSTD () Delete
Name: LEWIS, WENDA A
Address: 8008 S.W. 47TH COURT
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: LEWIS, H. WENDELL
Address: 2802 N.W. 4TH LANE
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: LEWIS, HUGH M
Address: 2802 N.W. 4TH LANE
City-St-Zip: GAINESVILLE, FL 32607

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
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: JUALENE O. LEWIS

MGR

01/16/2009

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