

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052593

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: HENDRY COUNTY CNF, LLC

## Current Principal Place of Business:

22290 S.W. 162 AVENUE  
MIAMI, FL 33170 US

## New Principal Place of Business:

## Current Mailing Address:

22290 S.W. 162 AVENUE  
MIAMI, FL 33170 US

## New Mailing Address:

FEI Number: 20-5029804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SUAREZ, ALBERTO J  
22290 SW 162 AVENUE  
MIAMI, FL 33170 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: COSTA, JOSE A III  
Address: 22290 S.W. 162 AVENUE  
City-St-Zip: MIAMI, FL 33170

Title: MGR ( ) Delete  
Name: SMITH, JOSE I  
Address: 22290 S.W. 162 AVENUE  
City-St-Zip: MIAMI, FL 33170

Title: MGR ( ) Delete  
Name: SUAREZ, ALBERTO J  
Address: 22290 S.W. 162 AVENUE  
City-St-Zip: MIAMI, FL 33170

Title: MGR ( ) Delete  
Name: SMITH, MARIA C  
Address: 22290 SW 162 AVENUE  
City-St-Zip: MIAMI, FL 33170

## 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: JOSE A. COSTA

MGR

04/22/2009

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