2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000088056

1. Entity Name

ALICO HOLDINGS, LLC



FILED May 15, 2008 08:00 AN Secretary of State

Principal Place of Business

6597 NICHOLAS BLVD.

UNIT 404

NAPLES, FL 34108 FL

Mailing Address

6597 NICHOLAS BLVD.

UNIT 404

NAPLES, FL 34108 US



03032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-8374969 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

MORRISON, DAVID N 9010 STRADA STELL COURT SUITE 103 NAPLES, FL 34109

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8.	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. I am famillar with, and accepted agent agent.	cept
	ICNATURE	

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KLEIN, JAYME A 6597 NICHOLAS BLVD., UNIT 404 NAPLES, FL 34108
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000951223 06/04/08-80025-006 138.75

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

SIGNATURE:

YPED DRAPRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4.27.09

Daytime Phone #