

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000093391

FILED
Jan 09, 2007
Secretary of State

Entity Name: GENEVA FOOD STORE, L.L.C.

Current Principal Place of Business:

140 WEST SR 46
GENEVA, FL 32732

New Principal Place of Business:

Current Mailing Address:

140 WEST SR 46
GENEVA, FL 32732

New Mailing Address:

FEI Number: 20-5599718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, JAYESH
1022 TROUT CREEK COURT
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

PATEL, MILAN
1022 TROUT CREEK COURT
OVIEDO, FL 32765 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: MILAN PATEL

01/09/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PATEL, JAYESH
Address: 1022 TROUT CREEK COURT
City-St-Zip: OVIEDO, FL 32765

Title: MGRM (X) Delete
Name: PATEL, MILAN
Address: 1022 TROUT CREEK COURT
City-St-Zip: OVIEDO, FL 32765

Title: MGRM (X) Delete
Name: PATEL, ALPA
Address: 1022 TROUT CREEK COURT
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PATEL, MILAN
Address: 1022 TROUT CREEK COURT
City-St-Zip: OVIEDO, FL 32765

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 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: MILAN PATEL

MGRM

01/09/2007

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