

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 03, 2008 8:00 am**  
**Secretary of State**

04-03-2008 90071 033 \*\*\*138.75

**DOCUMENT # L06000098854**

1. Entity Name  
WINN-DIXIE RALEIGH LEASING, LLC



Principal Place of Business  
5050 EDGEWOOD COURT  
JACKSONVILLE, FL 32254

Mailing Address  
5050 EDGEWOOD COURT  
JACKSONVILLE, FL 32254

**60019318**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03192008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
20-8456812

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**Make check payable to**  
**Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☒ Delete  
NAME PICHUTO, P.E.  
STREET ADDRESS 5050 EDGEWOOD CRT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE MGR ☒ Change ☐ Addition  
NAME PICHUTO, P.E.  
STREET ADDRESS 5050 EDGEWOOD COURT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE MGR ☐ Delete  
NAME APPEL, L.B.  
STREET ADDRESS 5050 EDGEWOOD CRT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE MGR ☐ Change ☒ Addition  
NAME WINN-DIXIE RALEIGH, INC.  
STREET ADDRESS 5050 EDGEWOOD COURT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE MGR ☐ Delete  
NAME REINKEN, S.C.  
STREET ADDRESS 5050 EDGEWOOD CRT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE MGR ☐ Change ☒ Addition  
NAME NUSSBAUM, B.L.  
STREET ADDRESS 5050 EDGEWOOD COURT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE MGR ☐ Delete  
NAME JAMES, JJ  
STREET ADDRESS 5050 EDGEWOOD CRT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE MGR ☐ Change ☒ Addition  
NAME LYNCH, P.L.  
STREET ADDRESS 5050 EDGEWOOD COURT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Change ☒ Addition  
NAME ECKSTEIN, F.O.  
STREET ADDRESS 5050 EDGEWOOD COURT  
CITY-ST-ZIP JACKSONVILLE, FL 32254

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 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.

Sheila C. Reinken

SIGNATURE: *Sheila C. Reinken*

3/28/08

(904) 783-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #