# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 09, 2007**
**Secretary of State**

DOCUMENT# L06000102324

**Entity Name:** PINE ISLAND GROWERS, LLC

**Current Principal Place of Business:**

3548 TANGERINE DRIVE
SAINT JAMES CITY, FL 33956 US

**New Principal Place of Business:**

**Current Mailing Address:**

3548 TANGERINE DRIVE
SAINT JAMES CITY, FL 33956 US

**New Mailing Address:**

**FEI Number: 84-1722986** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAESEMEYER, ELIZABETH
3548 TANGERINE DRIVE
SAINT JAMES CITY, FL 33956 US

**Name and Address of New Registered Agent:**

JARMOSZUK, DIANE
3548 TANGERINE DRIVE
SAINT JAMES CITY, FL 33956 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: DIANE JARMOSZUK 04/09/2007
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete
Name: JARMOSZUK, DIANE
Address: 591 RUM ROAD, PO BOX 641
City-St-Zip: NORTH CAPTIVA, FL 339450641 US

Title: MGR ( ) Delete
Name: JARMOSZUK, NICHOLAS
Address: 21884 AVALON DRIVE
City-St-Zip: ROCY RIVER, OH 44116 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition
Name: JARMOSZUK, DIANE
Address: 591 RUM ROAD, PO BOX 641
City-St-Zip: NORTH CAPTIVA, FL 339450641 US

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: DIANE JARMOSZUK MGR 04/09/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date