2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000760

Address:

City-St-Zip:

SEBRING, FL 33870

Entity Name: CENTER RIDGE FRUIT COMPANY, LLC

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1531 LAKEVIEW DRIVE SEBRING, FL 33870 **Current Mailing Address: New Mailing Address:** 1531 LAKEVIEW DRIVE SEBRING, FL 33870 FEI Number: 20-8152374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROOKER, LELAND III 1531 LAKEVIEW DRIVE SEBRING, FL 33870 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete KOPPEIN, THOMAS Name: Name: 1531 LAKEVIEW DRIVE Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: STEPHENS, DAVID Name: Address: 1531 LAKEVIEW DRIVE Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition STEPHENS, M.E. IV Name: Name: Address: 1531 LAKEVIEW DRIVE Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: B & L CATTLE COMPANY, , LLC Name: Address: 1531 LAKEVIEW DRIVE Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition STEPHENS, M.E. V Name: Name: 1531 LAKEVIEW DR

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.

Address:

City-St-Zip:

SIGNATURE: LELAND E. BROOKER III **MGRM** 03/24/2009