## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000071541

City-St-Zip:

Entity Name: NEW SMYRNA FARMERS MARKET, LLC

FILED Apr 15, 2009 Secretary of State

3673 LETTUCE LANE 3549 PIONEER TRAIL

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 US

Current Mailing Address: New Mailing Address:

3673 LETTUCE LANE 3549 PIONEER TRAIL

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 US

FEI Number: 35-2302812 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:

WRIGHT, RAYMOND A PLETERSKI, MARY E 3673 LETTUCE LANE 3549 PIONEER TRAIL

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 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: MARY E. PLETERSKI 04/15/2009

Electronic Signature of Registered Agent Date

City-St-Zip:

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

Name: WRIGHT, RAYMOND A Name:
Address: 3673 LETTUCE LANE Address:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PLETERSKI, MARY E
 Name:

 Address:
 3549 PIONEER TRAIL
 Address:

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168 US
 City-St-Zip:

NEW SMYRNA BEACH, FL 32168 US

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 YATES, HOLLY
 Name:

 Address:
 205 DUNE CIRCLE
 Address:

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32169 US
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SCRAGG, KEN B
 Name:

 Address:
 333 W. ARIEL ROAD
 Address:

 City-St-Zip:
 EDGEWATER, FL 32141 US
 City-St-Zip:

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.

SIGNATURE: MARY E. PLETERSKI MANG 04/15/2009