2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091293

Entity Name: SOUTHERN FRIED ICE CREAM, LLC

FILED Feb 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4004 S. MACDILL AVENUE TAMPA, FL 33611

Current Mailing Address: New Mailing Address:

4004 S. MACDILL AVENUE TAMPA, FL 33611

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

FARNHAM, TODD A

5630 S. ATLANTIS WAY

HOMOSASSA, FL 34487 US

GEBHARDT, JEFFREY L

4004 S. MACDILL AVENUE

TAMPA, FL 33611 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: JEFFREY L GEBHARDT 02/06/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition FARNHAM, TODD A Name: Name: DAVIS, LISA A Address: 5630 S. ATLANTIS WAY Address: 4004 S. MACDILL AVENUE City-St-Zip: HOMOSASSA, FL 34487 City-St-Zip: TAMPA, FL 33611

Title: MGR () Delete Title: MGR (X) Change () Addition
Name: HOFFMAN, MATTHEW P Name: DAVID, DARRYL A
Address: 4004 S_MACDILL_AVENUE
Address: 4004 S_MACDILL_AVENUE

 Address:
 4004 S. MACDILL AVENUE
 Address:
 4004 S. MACDILL AVENUE

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 TAMPA, FL 33611

Title: MGRM (X) Delete Title: () Change () Addition Name: REISKE, STEVEN Name:

 Name:
 REISKE, STEVEN
 Name:

 Address:
 4004 S. MACDILL AVENUE
 Address:

 City-St-Zip:
 TAMPA, FL 33611
 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: DARRYL A DAVID MGR 02/06/2009