## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000116303

FRENCH, ROYAL L JR

19114 ST BENEDICT DR

DUNNELLON, FL 34432 US

Name:

Address:

City-St-Zip:

Entity Name: THE ICE CHEST, LLC

FILED Jan 21, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 122 NE 6TH AVE WILLISTON, FL 32696 US **Current Mailing Address: New Mailing Address:** 547 NW 2ND AVE WILLISTON, FL 32696 US FEI Number: 26-1433446 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: JONES, DEBRA F 547 NW 2ND AVE WILLISTON, FL FL 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete JONES, DEBRA F Name: Name: Address: 547 NW 2ND AVE Address: City-St-Zip: WILLISTON, FL 32696 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JONES, DANIEL F Name: Address: 547 NW 2ND AVE Address: City-St-Zip: WILLISTON, FL 32696 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DEBRA JONES MGRM 01/21/2009