

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125957

Entity Name: PLP NATURAL PRODUCTS LLC

FILED  
Apr 30, 2009  
Secretary of State

**Current Principal Place of Business:**

953 NORTHWEST 3RD AVENUE, STE. 11  
FLORIDA CITY, FL 33034

**New Principal Place of Business:**

**Current Mailing Address:**

953 NORTHWEST 3RD AVENUE, STE. 11  
FLORIDA CITY, FL 33034

**New Mailing Address:**

FEI Number: 30-0455916      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PORTER, LORI  
95510 OVERSEAS HWY  
KEY LARGO, FL 33037 US

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

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:**

Title: MGRM ( ) Delete  
Name: PORTER, POWELL  
Address: 95510 OVERSEAS HWY  
City-St-Zip: KEY LARGO, FL 33037

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: PORTER, LORI  
Address: 95510 OVERSEAS HWY  
City-St-Zip: KEY LARGO, FL 33037

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LORI PORTER

MGRM

04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date