

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018430

FILED
Apr 22, 2009
Secretary of State

Entity Name: GALLO GULFCOAST NUTRITION LLC

Current Principal Place of Business:

3212 42ND ST W
BRADENTON, FL 34205 US

New Principal Place of Business:

6204 - 9TH AVE. WEST
BRADENTON, FL 34209 US

Current Mailing Address:

3212 42ND ST W
BRADENTON, FL 34205 US

New Mailing Address:

6204 - 9TH AVE. WEST
BRADENTON, FL 34209 US

FEI Number: 26-2009875

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLO, JAMES V
3212 42ND ST W
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

GALLO, JAMES V
6204 - 9TH AVE. WEST
BRADENTON, FL 34209 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: JAMES V GALLO

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GALLO, JAMES V
Address: 3212 42ND ST W
City-St-Zip: BRADENTON, FL 34205 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GALLO, JAMES V
Address: 6204 - 9TH AVE WEST
City-St-Zip: BRADENTON, FL 34209 US

Title: MGRM () Change (X) Addition
Name: GALLO, SANDRA L
Address: 6204 - 9TH AVE. WEST
City-St-Zip: BRADENTON, FL 34209 US

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: JAMES V GALLO

MGRM

04/22/2009

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