

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000059462

FILED  
Mar 21, 2009  
Secretary of State

**Entity Name:** LUKE'S ALL NATURAL PET FOOD, L.L.C.

**Current Principal Place of Business:**

9549 BURLINGTON PL  
BOCA RATON, FL 33434 US

**New Principal Place of Business:**

10534 WILES ROAD  
CORAL SPRINGS, FL 33076 US

**Current Mailing Address:**

9549 BURLINGTON PL  
BOCA RATON, FL 33434 US

**New Mailing Address:**

10534 WILES ROAD  
CORAL SPRINGS, FL 33076 US

**FEI Number:** 26-2812362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEFFRON, ELIZABETH  
9549 BURLINGTON PL  
BOCA RATON, FL 33434 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: MGR ( ) Delete  
Name: HEFFRON, ELIZABETH  
Address: 9549 BURLINGTON PL  
City-St-Zip: BOCA RATON, FL 33434 US

Title: MGRM ( ) Delete  
Name: TIMMES, HENRY J  
Address: 9549 BURLINGTON PL  
City-St-Zip: BOCA RATON, FL 33434 US

**ADDITIONS/CHANGES:**

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:** ELIZABETH HEFFRON

MGR

03/21/2009

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