

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000079489

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** HOMETOWN SUPERMARKETS, LLC

**Current Principal Place of Business:**

15560 N.W. HIGHWAY 441  
SUITE 200  
ALACHUA, FL 32615

**New Principal Place of Business:**

**Current Mailing Address:**

4801 HIGHWAY 101  
MINNETONKA, MN 55345

**New Mailing Address:**

**FEI Number:** 26-3215764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOSLEYN, EARL W JR  
15560 N.W. HIGHWAY 441  
SUITE 200  
ALACHUA, FL 32615 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:** CEO  
**Name:** LINDEEN, ARNETTE M  
**Address:** 4801 HIGHWAY 101  
**City-St-Zip:** MINNETONKA, MN 55345 US

**Title:** P  
**Name:** WINSOR, DOUGLAS J  
**Address:** 4801 HIGHWAY 101  
**City-St-Zip:** MINNETONKA, MN 55345 US

I hereby 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:** DOUGLAS J WINSOR

PRES

03/01/2011

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