

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000090988

Entity Name: BIZARRE FRUIT, LLC

**FILED**  
**Mar 20, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

7512 DOCTOR PHILLIPS BLVD., STE. 50-852  
ORLANDO, FL 32819

## **New Principal Place of Business:**

1518 SOUTH BABCOCK STREET  
C  
MELBOURNE, FL 32901

## **Current Mailing Address:**

7512 DOCTOR PHILLIPS BLVD., STE. 50-852  
ORLANDO, FL 32819

## **New Mailing Address:**

1518 SOUTH BABCOCK STREET  
C  
MELBOURNE, FL 32901

FEI Number: 27-3572825

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAYWORTH, CHANEY & THOMAS, P.A.  
202 N. HARBOR CITY BLVD., STE. 300  
MELBOURNE, FL 32935 US

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

MELLE, KELLY A  
1518 SOUTH BABCOCK STREET  
C  
MELBOURNE, FL 32901 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: KELLY ANN MELLE

03/20/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MELLE, KELLY  
Address: 1518 SOUTH BABCOCK STREET SUITE C  
City-St-Zip: MELBOURNE, FL 32901

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: KELLY ANN MELLE

MGRM

03/20/2011

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