

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000057036

Entity Name: TIM WHISNER FOODS LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

515 NORTH FLAGLER DRIVE, 20TH FLOOR  
C/O PATRICK J. CASEY, ESQ.  
WEST PALM BEACH, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

515 NORTH FLAGLER DRIVE, 20TH FLOOR  
C/O PATRICK J. CASEY, ESQ.  
WEST PALM BEACH, FL 33403

**New Mailing Address:**

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

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

CASEY, PATRICK J ESQ.  
515 NORTH FLAGLER DRIVE, 20TH FLOOR  
CASEY CIKLIN LUBITZ MARTENS & O'CONNELL  
WEST PALM BEACH, FL 33403 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  
Name: WHISNER, TIMOTHY K  
Address: 515 NORTH FLAGLER DRIVE, 20TH FLOOR  
City-St-Zip: WEST PALM BEACH, FL 33403

Title: MGR  
Name: CAMPBELL, JUDY B  
Address: 515 NORTH FLAGLER DRIVE, 20TH FLOOR  
City-St-Zip: WEST PALM BEACH, FL 33403

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: TIMOTHY K. WHISNER MGR 04/30/2012

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