

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000133641

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** SUNKIST PRODUCTS LLC

**Current Principal Place of Business:**

5379 LYONS RD.  
SUITE 175  
COCONUT CREEK, 33073

**New Principal Place of Business:**

1471 WEST HILLSBORO BLVD.  
DEERFIELD BCH, FL 33442

**Current Mailing Address:**

5379 LYONS RD.  
SUITE 175  
COCONUT CREEK, 33073

**New Mailing Address:**

P.O.BOX 8511  
DEERFIELD BCH, FL 33442

**FEI Number:** 32-0359599

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

INDUSTRY SUPPLY COMPANY LLC  
5379 LYONS RD.  
SUITE 175  
COCONUT CREEK, FL 33073 US

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

NUPP, WILLIAM J  
1471 W. HILLSBORO BCH.  
DEERFIELD BCH, FL 33442 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: WILLIAM J. NUPP

04/13/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ALL GOOD SERVICES  
Address: 2710 THOMES AVE.  
City-St-Zip: CHEYENNE, WY 82001

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: WILLIAM J. NUPP

CFO

04/13/2012

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