FILE NOW: Fee after May 1, will be $588.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILING FEE $ 203.75	Annual Report $100.00 + $103.75 Corporation Supplemental Fee
	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

DOCUMENT # L96000000842

1. Name and Mailing Address of Limited Liability Company

SUNRISE WHOLE GRAIN BREADS L.C.
~~2900 IVY STREET~~
TITUSVILLE FL 32796

If above mailing address is incorrect in any way, **line through incorrect information** and enter correction in Block 2a.

1a. Principal Place of Business Address
2825 GARDEN STREET
~~2900 IVY STREET~~
TITUSVILLE FL 32796

2. Principal Place of Business	2a. Mailing Address
2825 GARDEN ST	2825 GARDEN ST
Suite, Apt. #, etc.: UNIT # 6	Suite, Apt. #, etc.: UNIT # 6
City & State: TITUSVILLE, FL	City & State: TITUSVILLE, FL
Zip: 32796 Country: USA	Zip: 32796 Country: USA

3. Date Organized or Qualified: 08/05/1996
3a. State of Formation: FL

4. FEI Number: 59-3408820 ☐ Applied For ☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired ☐ $8.75 Additional Fee Required

7. Name and Address of Current Registered Agent	8. Name and Address of New Registered Agent
GOODWIN, BONNIE M ~~2900 IVY STREET~~ 5539 RIVER OAKS DR TITUSVILLE FL ~~32796~~ 32780	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City: FL Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE: Bonnie Goodwin (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE: 2.25.97

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	GOODWIN, THOMAS R	2825 GARDEN ST ~~2900 IVY STREET~~	TITUSVILLE FL 32796
MGRM	GOODWIN, BONNIE M	2825 GARDEN ST ~~2900 IVY STREET~~	TITUSVILLE FL 32796

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3/3/97

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

BONNIE GOODWIN

SIGNATURE: Bonnie Goodwin, Pres. 2.25.97 407.268.1009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #

INHSE10 R(12-96)