

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000521

Entity Name: CHIQUITA BONITA, LLC

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

3402 W 109TH CIRCLE
WESTMINSTER, CO 80031

New Principal Place of Business:

5420 CHIQUITA BLVD.
UNIT A
CAPE CORAL, FL 33910

Current Mailing Address:

P.O. BOX 350334
WESTMINSTER, CO 80035

New Mailing Address:

PO BOX 100607
CAPE CORAL, FL 33914

FEI Number: 51-0490933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIS, SEAN M
2320 FIRST STREET, SUITE 1000
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

ELLIS, SEAN A
2320 FIRST STREET, SUITE 1000
FORT MYERS, FL 33901 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: SEAN A. ELLIS

01/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MARTIN, DAVID
Address: 3402 W. 109TH CIRCLE
City-St-Zip: WESTMINSTER, CO 80031

Title: MGRM () Delete
Name: MARTIN, DEBRA
Address: 3402 W. 109TH CIRCLE
City-St-Zip: WESTMINSTER, CO 80031

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MARTIN, DAVID
Address: PO BOX 100607
City-St-Zip: CAPE CORAL, FL 33914

Title: MGRM (X) Change () Addition
Name: MARTIN, DEBRA
Address: PO BOX 100607
City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DEBRA J. MARTIN

MGRM

01/23/2009

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