

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90325 046 ****50.00

DOCUMENT # M05000005822					
1. Entity Name GUEST SUPPLY, LLC					
Principal Place of Business C/O SYSCO CORPORATION 1390 ENCLAVE PARKWAY HOUSTON, TX 77077			Mailing Address C/O SYSCO CORPORATION 1390 ENCLAVE PARKWAY HOUSTON, TX 77077		
2. Principal Place of Business - No P.O. Box # 4301 US HIGHWAY ONE		3. Mailing Address 1390 ENCLAVE PARKWAY			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State MONMOUTH JUNCTION, NJ		City & State HOUSTON, TX		4. FEI Number 22-2320483	
Zip 08852		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM NICHOLS, MICHAEL C 1390 ENCLAVE PARKWAY HOUSTON, TX 77077		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ACCORDI, LAWRENCE J 1390 ENCLAVE PARKWAY HOUSTON, TX 77077		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR STANLEY, CLIFFORD W 4301 U.S. HIGHWAY ONE MONMOUTH, NJ 08852		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.					
SIGNATURE: _____			MICHAEL C. NICHOLS, MANAGER 4/24/07 281-584-1390		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

60047029



04192007 Chg-LLC CR2E083 (12/06)

FEIN: 22-2320483

Guest Supply, LLC

MANAGERS:

NAME

MAILING ADDRESS

Lawrence J. Accardi	1390 Enclave Parkway, Houston, TX 77077
Clifford W. Stanley	4301 US Highway One, Monmouth Junction, NJ 08852
Michael C. Nichols	1390 Enclave Parkway, Houston, TX 77077

ATTACHMENT

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