

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90380 041 ****50.00

DOCUMENT # M06000005934

1. Entity Name
PARTNERED BEVERAGES LLC



Principal Place of Business
**5500 CENEX DRIVE
INVER GROVE HEIGHTS, MN 55077**

Mailing Address
**5500 CENEX DRIVE
INVER GROVE HEIGHTS, MN 55077**

60049456



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04232007 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number
20-5706238

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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

Signature, typed or printed name of registered agent and title if applicable.

(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
CHS INC
5500 CENEX DRIVE
INVER GROVE HEIGHTS, MN 55077** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
(See attached listing) ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
SEASIDE PROPERTIES LLC
2120 3RD AVE NORTH
BILLINGS, MT 59101** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/30/07

651-355-5084

ATTACHMENT 60049456
~~#~~ Mo 6000005934

PARTNERED BEVERAGES, LLC

STATE OF INCORPORATION	Minnesota
DATE OF INCORPORATION	10/11/2006
LAST UPDATED	10/11/2006

MEMBERS	ADDRESS	ADDRESS	CITY	STATE/ZIP
Seaside Properties, LLC	2120 3rd Avenue North		Billings	MT 59101
CHS Inc.	5500 Cenex Drive		Inver Grove Heights	MN 55077

MEMBER REPRESENTATIVES	ADDRESS	ADDRESS	CITY/STATE/ZIP	REPRESENTING
Brenda Burkhartsmeier	2120 3rd Avenue North		Billings, MT 59101	Seaside Properties, LLC
Dennis Burkhartsmeier	2120 3rd Avenue North		Billings, MT 59101	Seaside Properties, LLC
Don Olson	5500 Cenex Drive		Inver Grove Heights, MN 55077	CHS Inc.
Dan Ostendorf	5500 Cenex Drive		Inver Grove Heights, MN 55077	CHS Inc.
Rick Cummings	5500 Cenex Drive		Inver Grove Heights, MN 55077	CHS Inc.
Gary Braaten	5500 Cenex Drive		Inver Grove Heights, MN 55077	CHS Inc.

OFFICERS (IF ANY)	ADDRESS	ADDRESS	CITY/STATE/ZIP	TITLE
Brenda Burkhartsmeier	2120 3rd Avenue North		Billings, MT 59101	President
Dennis Brukhartsmeier	2120 3rd Avenue North		Billings, MT 59101	Vice President
Gary Braaten	5500 Cenex Drive		Inver Grove Hts, MN 55077	Secretary