

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001373

FILED  
Jun 25, 2009  
Secretary of State

Entity Name: SPREADRITE ORGANICS, LLC

**Current Principal Place of Business:**

270 DOUG BAKER BLVD  
SUITE 700-234  
BIRMINGHAM, AL 35242

**New Principal Place of Business:**

**Current Mailing Address:**

270 DOUG BAKER BLVD  
SUITE 700-234  
BIRMINGHAM, AL 35242

**New Mailing Address:**

FEI Number: 20-1354056      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

BRUCE, MICHAEL S  
1550 75TH CIRCLE NE  
ST. PETERSBURG, FL 33702      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BRUCE, HUNTER  
Address: 270 DOUG BAKER BLVD., SUITE 700-234  
City-St-Zip: BIRMINGHAM, AL 35242

Title: MGR ( ) Delete  
Name: BRUCE, SCOTT  
Address: 270 DOUG BAKER BLVD., SUITE 700-234  
City-St-Zip: BIRMINGHAM, AL 35242

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HUNTER BRUCE

MGR

06/25/2009

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