## 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M07000006172

Entity Name: ARBORGEN, LLC

FILED Feb 16, 2010 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

180 WESTVACO ROAD SUMMERVILLE, SC 29484

**Current Mailing Address: New Mailing Address:** 

PO BOX 840001

SUMMERVILLE, SC 29484

FEI Number: 58-2521259 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CUNNINGHAM, MICHAEL W 5277 TOWER ROAD SUITE A2 TALLAHASSEE, FL 32303

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:

Name: WELLS, BARBARA Address: 180 WESTVACO ROAD City-St-Zip: SUMMERVILLE, SC 29484

Title: MGR

Name: BARFIELD, WAYNE Address: 180 WESTVACO ROAD City-St-Zip: SUMMERVILLE, SC 29484

Title: MGR

MUNSON, KENENTH PH.D. Name: 6400 POPLAR AVE., SUITE T1-8-019 Address:

City-St-Zip: MEMPHIS, TN 38197

Title: MGR

Name: LIEBETREU, DAVID

6400 POPLAR AVE., SUITE T1-8-30 Address:

City-St-Zip: MEMPHIS, TN 38197

Title: MGR

MORIARTY, LUKE Name:

L3, 7-9 FANSHAWE STREET Address: AUCKLAND, NEW ZEALAND, XX City-St-Zip:

Title:

BURTON, BRUCE Name:

Address: L3, 7-9 FANSHAWE STREET AUCKLAND, NEW ZEALAND, XX City-St-Zip:

I hereby 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 Statues.

SIGNATURE: BARBARA WELLS **MGR** 02/16/2010

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