2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000001572

Address:

City-St-Zip:

P.O. BOX 1639

JACKSON, MS 39215

Entity Name: BUNGE-ERGON VICKSBURG, LLC

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	NING ROAD RG, MS 39183			
Current Mailing Address:			New Mailing Address:	
	NING ROAD RG, MS 39183			
FEI Number	: 20-5349808	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
1200 SOU	PORATION SYS ITH PINE ISLAN ION, FL 33324			
	e named entity s e of Florida.	ubmits this statement for the p	purpose of changing its register	ed office or registered agent, or both
SIGNATUI	RE:			
	Electron	c Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () SCHARF, MICH, 11720 BORMAN ST. LOUIS, MO	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () RAGAN, C BAIL 11720 BORMAN ST. LOUIS, MO	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR () DAVIS, H. DON P.O. BOX 1639 JACKSON, MS	Delete 39215	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGR () LAMPTON, LES	Delete LIE B III	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: C, BAILEY RAGAN MGR 04/21/2009