


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company LAND-O-SUN DAIRIES, L.L.C. 2900 BRISTOL HIGHWAY JOHNSON CITY TN 37601		DOCUMENT # M9600000531		1a. Principal Place of Business Address 2900 BRISTOL HIGHWAY JOHNSON CITY TN 37601	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified 12/31/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. State of Formation DE	
City & State		City & State		4. FEI Number 62-1657432	
Zip		Country		5. Date of Last Report 05/19/1998	
Zip		Country		6. Certificate of Status Desired <input type="checkbox"/> SB 7a Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301			8. Name and Address of New Registered Agent/Office		
Name			Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, etc.			City		
City			Zip Code FL		
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____			DATE _____		
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when not starting)					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	LOS HOLDINGS, INC.	3811 TURTLE CREEK BLVD., 2515 MCKINNEY AVE. LB30 SUITE 1200		DALLAS TX 75201	
				600002874716--4 -05/13/99--01117--020 ***188.75 ***188.75	
				AL APR 12 1999	
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual 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, and that my name appears in Block 10, or on an attachment with an address.					
SIGNATURE: <i>LOS Holdings, Inc. Myron M. White Assistant Secretary 4-19-99 423 283 5200</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER					

FILED
99 MAY -5 AM 10:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA