

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 09, 2007 08:00 AM
Secretary of State

DOCUMENT # M99000000303	
1. Entity Name SEATTLE'S BEST COFFEE LLC	

Principal Place of Business 2401 UTAH AVE S STE 800, S-LA1 SEATTLE WA 98134	Mailing Address 2401 UTAH AVE S STE 800, S-LA1 SEATTLE WA 98134
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E083 (10/06)

City & State	City & State	4. FEI Number 91-1895025	Applied For ☐ Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MBR SEATTLE COFFEE COMPANY 2401 UTAH AVENUE S SEATTLE WA 98134 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR EHLERS, TOM 2401 UTAH AVENUE S SEATTLE WA 98134 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR JOHNSON, GREGG 2401 UTAH AVENUE S SEATTLE WA 98134 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR RUSSELL, CRAIG 2401 UTAH AVENUE S SEATTLE WA 98134 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition 000000696853 04/18/07-80016-010 50.00
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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 Section 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: *Casey M. Vault*
SEATTLE COFFEE COMPANY, MBR
BY: CASEY M. VAULT, ASSISTANT SECRETARY