

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000057692

**Entity Name:** CENTRAL STATES SPECIALTY BLENDING LLC

**Current Principal Place of Business:**

2664 JEWETT LANE  
SANFORD, FL 32771

**Current Mailing Address:**

2664 JEWETT LANE  
SANFORD, FL 32771

**FEI Number:** 45-0542170

**Certificate of Status Desired:** No

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

FONTES, ANGELIA  
102 LOCH ARBOR CT.  
SANFORD, FL 32771 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:** ANGELIA FONTES

03/23/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            MANAGER  
Name            CORTEVILLE, PETER A  
Address        525 AMBERIDGE TRAIL NW  
City-State-Zip: ATLANTA GA 30328

Title            MANAGER  
Name            THOMAS, MARK D  
Address        505 AVIGNON COURT  
City-State-Zip: SANDY SPRINGS GA 30350

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARK D. THOMAS

MANAGER

03/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date