

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022234

Entity Name: JLB/JAB COMPANY, LLC

FILED  
Apr 24, 2006  
Secretary of State

**Current Principal Place of Business:**

600 HAVERFORD ROAD  
SUITE G101  
HAVERFORD, PA 19041

**New Principal Place of Business:**

**Current Mailing Address:**

600 HAVERFORD ROAD  
SUITE G101  
HAVERFORD, PA 19041

**New Mailing Address:**

FEI Number: 01-0572166      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FRAZIER, ROBERT W JR. ESQ  
FRAZIER, HOTTE & ASSOCIATES, P.A.  
2400 EAST COMMERCIAL BLVD., STE. 826  
FORT LAUDERDALE, FL 33308 US

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

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:**

Title: MGRM ( ) Delete  
Name: BELMONT, BARRY J  
Address: 620 COLLEGE AVE.  
City-St-Zip: HAVERFORD, PA 19041

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BELMONT, BARRY J  
Address: 600 HAVERFORD ROAD, SUITE G101  
City-St-Zip: HAVERFORD, PA 19041

Title: V ( ) Change (X) Addition  
Name: MARDINLY, PETER A ESQ  
Address: 600 HAVERFORD ROAD, SUITE G101  
City-St-Zip: HAVERFORD, PA 19041 US

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: PETER A MARDINLY

V

04/24/2006

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