2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000005746

1. Entity Name
530 BURNS LANE, L.L.C.

Principal Place of Business	Mailing Address
1551 2ND STREET SARASOTA, FL 34236	1551 2ND STREET SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE

07152008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
65-1173166	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PFLUGNER, J. GEOFFREY
8470 ENTERPRISE CIRCLE, STE 201
BRADENTON, FL 34202

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U00000956308
07/25/08-80002-016 138.75

9.	MANAGING MEMBERS / MANAGERS
TITLE	MGR
NAME	JBS MANAGEMENT, LLC
STREET ADDRESS	1551 2ND STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Howard Rosenblatt   1-14-08   631-544-6500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #