

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060459

FILED  
Jul 23, 2008  
Secretary of State

Entity Name: JADD, LLC

**Current Principal Place of Business:**

20 ECKERT FARM ROAD  
SADDLE RIVER, NJ 07458

**New Principal Place of Business:**

**Current Mailing Address:**

24 LOOKOUT POINT TR.  
TOTOWA, NJ 07512

**New Mailing Address:**

FEI Number: 34-2011512      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

GARLICK, THOMAS B ESQ  
5551 RIDGEWOOD DRIVE, SUITE 101  
NAPLES, FL 34108      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: OLDJA, JENNIFER  
Address: 20 ECKERT FARM ROAD  
City-St-Zip: SADDLE RIVER, NJ 07458

Title: MGRM ( ) Delete  
Name: OLDJA, DIANA  
Address: 1 IRVING PLACE  
City-St-Zip: NEW YORK, NY 10001

Title: MGRM ( ) Delete  
Name: OLDJA, ALLEN  
Address: 24 LOOKOUT PT. TR.  
City-St-Zip: TOTOWA, NJ 07512

Title: MGRM ( ) Delete  
Name: OLDJA, DANIEL  
Address: 24 LOOKOUT PT. TR.  
City-St-Zip: TOTOWA, NJ 07512

Title: MGR ( ) Delete  
Name: OLDJA, VERICA  
Address: 24 LOOKOUT PT. TR.  
City-St-Zip: TOTOWA, NJ 07512

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: VERICA OLDJA

MGR

07/23/2008

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