

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000667

FILED  
Apr 07, 2008  
Secretary of State

Entity Name: JNT COMMUNICATIONS, LLC

**Current Principal Place of Business:**

537 10TH STREET W  
BRADENTON, FL 34205

**New Principal Place of Business:**

**Current Mailing Address:**

385 KINGS HIGHWAY NORTH  
CHERRY HILL, NJ 08034

**New Mailing Address:**

FEI Number: 20-8363380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LIPKIN, ROBERT ESQ  
537 10TH STREET W  
BRADENTON, FL 34205 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: HUTCHINSON, JANET  
Address: 116 N HADDON AVENUE, STE C  
City-St-Zip: HADDONFIELD, NJ 08033

Title: MGRM ( ) Delete  
Name: SCHWARTZ-CASSELL, TOBI  
Address: 6 BROOKVILLE DRIVE  
City-St-Zip: CHERRY HILL, NJ 08003

Title: MGRM ( ) Delete  
Name: SIPERA, NANCY  
Address: 385 KINGS HIGHWAY N  
City-St-Zip: CHERRY HILL, NJ 08034

**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:

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: NANCY SIPERA

MGRM

04/07/2008

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