

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002621

FILED
Apr 22, 2009
Secretary of State

Entity Name: JERO FORT PIERCE, L.L.C.

Current Principal Place of Business:

6300 N.E. 1ST AVENUE, SUITE 300
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

6300 N.E. 1ST AVENUE, SUITE 300
FORT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 65-0996576

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SADER, ESQ., ROBERT L.
1901 W. CYPRESS CREEK ROAD
SUITE 415
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

SADER, ESQ., ROBERT L.
6300 NE 1ST AVENUE
SUITE 202
FORT LAUDERDALE, FL 33334 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:

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THE JEFFREY ROSCHMAN REVOCABLE TRUST
Address: 6300 N.E. 1ST AVENUE, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: MGRM () Delete
Name: THE ROBERT ROSCHMAN REVOCABLE TRUST
Address: 6300 N.E. 1ST AVENUE, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33334

ADDITIONS/CHANGES:

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: ROBERT ROSCHMAN

MGRM

04/22/2009

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