

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000014346

FILED
Feb 05, 2009
Secretary of State

Entity Name: THE F.H. JACOBSON MANAGEMENT, L.L.C.

Current Principal Place of Business:

3405 HIGHLANDS BRIDGE ROAD
SARASOTA, FL 34235

New Principal Place of Business:

Current Mailing Address:

3405 HIGHLANDS BRIDGE ROAD
SARASOTA, FL 34235

New Mailing Address:

FEI Number: 22-3752241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBSON, FREDERIKA H
3405 HIGHLANDS BRIDGE ROAD
SARASOTA, FL 34235 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: JACOBSON, FREDERIKA
Address: 3405 HIGHLANDS BRIDGE ROAD
City-St-Zip: SARASOTA, FL 34235

Title: MGRM () Delete
Name: JACOBSON, GARY
Address: 99 SUSAN LANE
City-St-Zip: CHATHAM, NJ 07928

Title: MGRM () Delete
Name: JACOBSON, LANCE
Address: 74 WEST ST
City-St-Zip: MEDFIELD, MA 02052

Title: MGRM () Delete
Name: JACOBSON, ERIC
Address: 2210 WALKER CT
City-St-Zip: PHENIX CITY, AL 36867

Title: MGRM () Delete
Name: JACOBSON, JEFFREY
Address: 28 BABE RUTH DR
City-St-Zip: SUDBURY, MA 01776

Title: MGRM () Delete
Name: MARKOWITZ, CINDY J
Address: 99 MEADOW LANE
City-St-Zip: BOXBOROUGH, MA 01719

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
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Title: () Change () Addition
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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: FREDERIKA H. JACOBSON

MGR

02/05/2009

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