


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000003338 1. Entity Name JACOBY ENTERPRISES, L.L.C.	
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Principal Place of Business 1010 W PEBBLE BEACH CIRCLE WINTER SPRINGS, FL 32708	Mailing Address 1010 W PEBBLE BEACH CIRCLE WINTER SPRINGS, FL 32708
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DO NOT WRITE IN THIS SPACE



01122005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3720373	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent JACOBY, HARVEY 933 LEE ROAD, 1ST FLOOR ORLANDO, FL	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JACOBY, HARVEY 1010 PEBBLE BEACH CIRCLE WEST WINTER SPRINGS, FL 327084210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JACOBY, JANICE J 1010 PEBBLE BEACH CIRCLE WEST WINTER SPRINGS, FL 327084210
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Harvey Jacoby 1/16/05 407 645 5008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #