2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 12, 2007
Secretary of State

DOCUMENT# L01000003384

Entity Name: J.B. PHILLIPS, LLC

Current Principal Place of Business:

509 WESTON PLACE
DEBARY, FL 32713

New Principal Place of Business:

Current Mailing Address:

509 WESTON PLACE
DEBARY, FL 32713

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

PHILLIPS, BERT T
509 WESTON PLACE
DEBARY, FL 32713 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:	PHILLIPS, JOYCE A	
Address:	509 WESTON PLACE	
City-St-Zip:	DEBARY, FL 32713	
Title:	MGRM	( ) Delete
Name:	PHILLIPS, BERT T	
Address:	509 WESTON PLACE	
City-St-Zip:	DEBARY, FL 32713	
Title:	MGRM	( ) Delete
Name:	HENSLEY, TRACY D	
Address:	7305 GLEN BROOK LN.	
City-St-Zip:	CHARLOTTE, NC 28265	
Title:	MGRM	( ) Delete
Name:	INDIHAR, LISA C	
Address:	7170 AMBERWOOD LN	
City-St-Zip:	SAVAGE, MN 55378	

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:	

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: BERT T. PHILLIPS PRES 07/12/2007

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