

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012636

Entity Name: JUICE AND JAVA CAFE, LLC

FILED
Mar 25, 2008
Secretary of State

Current Principal Place of Business:

75 N. ORLANDO AVE.
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

22 COUNTRY CLUB RD
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 65-1125517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, KIMBERLY A
22 COUNTRY CLUB RD
COCOA BEACH, FL 32931 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: BROWN, DAVID D
Address: 22 COUNTRY CLUB RD
City-St-Zip: COCOA BEACH, FL 32931

Title: MGRM () Delete
Name: BROWN, KIMBERLY A
Address: 22 COUNTRY CLUB RD
City-St-Zip: COCOA BEACH, FL 32931

Title: MGRM () Delete
Name: NYLANDER, KYLE A
Address: 325 SOUTH BANANA RIVER DR. #105
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BROWN, DAVID D
Address: 22 COUNTRY CLUB RD
City-St-Zip: COCOA BEACH, FL 32931

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: KIMBERLY BROWN

MBR

03/25/2008

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