

2002 UNIFORM BUSINESS REPORT (UBR)

8/15

FILED
Aug 29, 2002 8:00 am
Secretary of State

08-19-2002 90139 035 ****50.00

DOCUMENT # L01000012706

1. Entity Name

J.A.N. ENTERPRISES, L.L.C.

Principal Place of Business

**878 17TH ST.
 VERO BEACH FL 32960**

Mailing Address

**878 17TH ST.
 VERO BEACH FL 32960**

98596

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-1128843**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**FENNELL, TODD W.
 979 BEACHLAND BLVD.
 VERO BEACH FL 32963**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By September 25, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **President**
 NAME **Janice A. Neubauer**
 STREET ADDRESS **3780 8th Lane**
 CITY-ST-ZIP **VERO Beach, FL 32960**

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10. ADDITIONS/CHANGES

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CR2E083 (4/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 606, Florida Statutes.

SIGNATURE: Janice A. Neubauer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8-8-02 772-562-9119

Date

Daytime Phone #