

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006538

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** J & R FINANCIAL GROUP, LLC

**Current Principal Place of Business:**

217 GOOLSBY BLVD.  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

7301 WILES ROAD  
SUITE 202  
CORAL SPRINGS, FL 33067

**Current Mailing Address:**

217 GOOLSBY BLVD.  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

7301 WILES ROAD  
SUITE 202  
CORAL SPRINGS, FL 33067

**FEI Number:** 04-3623828

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOKSA, JONATHAN J  
3688 COCO LAKE DRIVE  
COCONUT CREEK, FL 33073 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: MGR ( ) Delete  
Name: THAIS, RICHARD  
Address: 3420 NW 21ST COURT  
City-St-Zip: COCONUT CREEK, FL 33066

Title: MGR ( ) Delete  
Name: BOKSA, JONATHAN J  
Address: 3688 COCO LAKE DRIVE  
City-St-Zip: COCONUT CREEK, FL 33073

**ADDITIONS/CHANGES:**

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:** JONATHAN J BOKSA

MGR

04/30/2008

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