

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006560

Entity Name: SAM AND JACK FAMILY, LLC

FILED
Jun 29, 2005
Secretary of State

Current Principal Place of Business:

3200 HIDDEN HOLLOW LANE
DAVIE, FL 3328

New Principal Place of Business:

Current Mailing Address:

3200 HIDDEN HOLLOW LANE
DAVIE, FL 3328

New Mailing Address:

FEI Number: 43-1956165 FEI Number Applied For () FEI Number Not Applicable () 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:

Name and Address of New Registered Agent:

SKINNER, DAVID
3200 HIDDEN HOLLOW LANE
DAVIE, FL 3328 US

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: SKINNER, DAVID
Address: 3200 HIDDEN HOVEN IN
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: MGRM () Delete
Name: SKINNER, DAVID
Address: 3200 HIDDEN HALLOW LN
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: MGRM () Delete
Name: SKINNER, JACQUELINE
Address: 3200 HIDDEN HOLLOW IN
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: MGRM () Delete
Name: SKINNER, SAMANTHA
Address: 3200 HIDDEN HOLLOW LN
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: MGR () Delete
Name: SKINNER, MARY
Address: 3200 HIDDEN HOLLOW LANE
City-St-Zip: DAVIE, FL 33328

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARY SKINNER

MGR

06/29/2005

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