

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022035

Entity Name: JURASSIC VALLEY, LLC

FILED
Mar 18, 2008
Secretary of State

Current Principal Place of Business:

5145 HARVEY TEW ROAD
PLANT CITY, FL 33565

New Principal Place of Business:

Current Mailing Address:

5145 HARVEY TEW ROAD
PLANT CITY, FL 33565

New Mailing Address:

FEI Number: 36-4506073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SVENSSON, MARLENE
5145 HARVEY TEW ROAD
PLANT CITY, FL 33565 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: SVENSSON, MARLENE
Address: 5145 HARVEY TEW ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SVENSSON, MARLENE A
Address: 3709 CORK ROAD
City-St-Zip: PLANT CITY, FL 33565

Title: MGRM () Change (X) Addition
Name: GORSKA, ELEONOR M
Address: 4542 KEENE ROAD
City-St-Zip: PLANT CITY, FL 33565

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: MARLENE SVENSSON

MGRM

03/18/2008

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