

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002149

Entity Name: JDAR UNLIMITED, LLC

FILED  
Jan 07, 2009  
Secretary of State

## Current Principal Place of Business:

950 CELEBRATION BLVD #B  
CELEBRATION, FL 34747

## New Principal Place of Business:

950 CELEBRATION BLVD #B  
CELEBRATION, FL 34747 US

## Current Mailing Address:

950 CELEBRATION BLVD #B  
CELEBRATION, FL 34747

## New Mailing Address:

950 CELEBRATION BLVD #B  
CELEBRATION, FL 34747 US

FEI Number: 59-3766013

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

W. EDWARD MCLEOD, P.A.  
284 PARK AVENUE NORTH  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

W. EDWARD MCLEOD, P.A.  
284 PARK AVENUE NORTH  
SUITE 200  
WINTER PARK, FL 32789 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:

01/07/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: RADYS, ALDONA  
Address: 950 CELEBRATION BLVD #B  
City-St-Zip: CELEBRATION, FL 34747

Title: MGRM ( ) Delete  
Name: DERUSHA, JIM  
Address: 950 CELEBRATION BLVD #B  
City-St-Zip: CELEBRATION, FL 34747

## 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: ALDONA RADYS

MGRM

01/07/2009

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