

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000023136

**FILED**  
**Apr 01, 2012**  
**Secretary of State**

**Entity Name:** JACOBS FUNERAL SERVICES, L.L.C.

**Current Principal Place of Business:**

9050 KIMBERLY BLVD #65-66  
BOCA RATON, FL 33434

**New Principal Place of Business:**

19785 HAMPTON DR #1  
BOCA RATON, FL 33434 UN

**Current Mailing Address:**

9050 KIMBERLY BLVD #65-66  
BOCA RATON, FL 33434

**New Mailing Address:**

19785 HAMPTON DR #1  
BOCA RATON, FL 33434 UN

**FEI Number:** 45-0519493

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEUTSCH, STEVEN W ESQ.  
C/O FRANK, WEINBERG & BLACK, P.L.  
7805 S.W. 6TH COURT  
PLANTATION, FL 33324 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  
**Name:** JACOBS, GARRETT  
**Address:** 19785 HAMPTON DR #1  
**City-St-Zip:** BOCA RATON, FL 33434

I hereby 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:** GARRETT JACOBS

MGRM

04/01/2012

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