2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# L03000031386

Entity Name: JAREK CO, LLC

Current Principal Place of Business:

3784 GOLDEN REEDS LANE
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

6475 FERBER ROAD
JACKSONVILLE, FL 32277 US

Current Mailing Address:

3784 GOLDEN REEDS LANE
JACKSONVILLE, FL 32224 US

New Mailing Address:

6475 FERBER ROAD
JACKSONVILLE, FL 32277 US

FEI Number: 65-1201129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINCY, MALCOLM G JR.
3784 GOLDEN REEDS LANE
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

QUINCY, MALCOLM G JR.
6475 FERBER ROAD
JACKSONVILLE, FL 32277 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: 04/09/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: QUINCY, MALCOLM G JR.
Address: 3784 GOLDEN REEDS LANE
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: MGRM (X) Delete
Name: QUINCY, KIMBERLY J
Address: 3784 GOLDEN REEDS LANE
City-St-Zip: JACKSONVILLE, FL 32224 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: QUINCY, MALCOLM G JR.
Address: 6475 FERBER ROAD
City-St-Zip: JACKSONVILLE, FL 32277 US

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: MALCOLM G QUINCY JR. MGR 04/09/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date