FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY 26 AM 9:47

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000034219

1. Entity Name
SB JAX, LLC

400076106744
06/12/06--01049--004 **250.00

Principal Place of Business	Mailing Address
SUNTRUST BUILDING 200 W. FORSYTH ST., STE. 1730 JACKSONVILLE, FL 32202	1936 LEE ROAD SUITE 101 WINTER PARK, FL 32789

01092006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business	3. Mailing Address
450 N. Wymore Road	450 N. Wymore Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Winter Park Florida	City & State: Winter Park Florida
Zip: 32789 Country: USA	Zip: 32789 Country: USA

4. FEI Number: 59-3121789 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
W&P SERVICES, INC. 1936 LEE RD., STE. 101 WINTER PARK, FL 32789	Name Street Address (P.O. Box Number is Not Acceptable): 450 N. Wymore Road City: Winter Park FL Zip Code: 32789

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CHARTOUNI, NABIL 1936 LEE RD., STE. 101 WINTER PARK, FL 32789	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	450 N. Wymore Road Winter Park, FL 32789	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VAGHADIA, VINOD 1936 LEE RD., STE. 101 WINTER PARK, FL 32789	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	450 N. Wymore Road Winter Park, FL 32789	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CHARTOUNI, CAMERON 1936 LEE RD., STE. 101 WINTER PARK, FL 32789	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	450 N. Wymore Road Winter Park, FL 32789	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LAPWOOD, CAROL 1936 LEE RD., STE. 101 WINTER PARK, FL 32789	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	450 N. Wymore Road Winter Park, FL 32789	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: V. VAGHADIA 21 APR 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #