

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042944

Entity Name: JBD ENTERPRISES, LLC

FILED
Aug 23, 2005
Secretary of State

Current Principal Place of Business:

3145 SECRET WOODS TRAIL, WEST
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

7860 MOUNT RANIER DRIVE
JACKSONVILLE, FL 32256 US

Current Mailing Address:

3145 SECRET WOODS TRAIL, WEST
JACKSONVILLE, FL 32216 US

New Mailing Address:

7860 MOUNT RANIER DRIVE
JACKSONVILLE, FL 32256 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RIBER, JEFFREY K
3145 SECRET WOODS TRAIL, WEST
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

RIBER, JEFFREY K
7860 MOUNT RANIER DRIVE
JACKSONVILLE, FL 32256 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:

08/23/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RIBER, JEFFREY K
Address: 3145 SECRET WOODS TRAIL, WEST
City-St-Zip: JACKSONVILLE, FL 32216 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RIBER, JEFFREY K
Address: 7860 MOUNT RANIER DRIVE
City-St-Zip: JACKSONVILLE, FL 32256 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEFFREY K. RIBER

MGRM

08/23/2005

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