

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000050703

Entity Name: JSNB, LLC

FILED  
Jan 05, 2009  
Secretary of State

## Current Principal Place of Business:

1109 HUMMINBIRD LANE  
BRANDON, FL 33511

## New Principal Place of Business:

1109 HUMMINGBIRD LANE  
BRANDON, FL 33511

## Current Mailing Address:

1109 HUMMINBIRD LANE  
BRANDON, FL 33511

## New Mailing Address:

1109 HUMMINGBIRD LANE  
BRANDON, FL 33511

FEI Number: 20-0475197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, RANDELL M  
315 S. HYDE PARK AVENUE  
TAMPA, FL 33606 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: PT ( ) Delete  
Name: BUSCIGLIO, NORMAN  
Address: 1109 HUMMINGBIRD LN  
City-St-Zip: BRANDON, FL 33511

Title: S ( ) Delete  
Name: BUSCIGLIO, JOHN ANTHONY  
Address: 2103 TRAPWELL RD E  
City-St-Zip: PLANT CITY, FL 33511

## ADDITIONS/CHANGES:

Title: PT (X) Change ( ) Addition  
Name: BUSCIGLIO, NORMAN  
Address: 1109 HUMMINGBIRD LN  
City-St-Zip: BRANDON, FL 33511

Title: S (X) Change ( ) Addition  
Name: BUSCIGLIO, JOHN ANTHONY  
Address: 2103 TRAPNELL RD E  
City-St-Zip: PLANT CITY, FL 33566

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: NORMAN BUSCIGLIO

PT

01/05/2009

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