

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011531

Entity Name: JACS, LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

12273 EMERALD COAST PKWY, UNIT 108
DESTIN, FL 32550

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6697
DESTIN, FL 32550

New Mailing Address:

FEI Number: 80-0096561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, STEPHEN D MGRM
PO BOX 6697
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

DIXON, STEPHEN D MGRM
12273 EMERALD COAST PKWY.
SUITE 108
DESTIN, FL 32550 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:

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DIXON, STEPHEN D
Address: 12273 EMERALD COAST PKWY, UNIT 108
City-St-Zip: DESTIN, FL 32550

Title: MGRM () Delete
Name: DIXON, CARLA J
Address: 12273 EMERALD COAST PKWY, UNIT 108
City-St-Zip: DESTIN, FL 32550

Title: MGRM () Delete
Name: KAZEK, JON J
Address: 12273 EMERALD COAST PKWY, UNIT 108
City-St-Zip: DESTIN, FL 32550

Title: MGRM () Delete
Name: KAZEK, ANNE HURRELE
Address: 12273 EMERALD COAST PKWY, UNIT 108
City-St-Zip: DESTIN, FL 32550

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEPHEN DIXON

MGRM

03/20/2009

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