

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000039836

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** J.A.B. SHOPPING CENTER, L.L.C.

**Current Principal Place of Business:**

JAB SHOPPING CENTER LLC  
4200 TAMiami TRAIL  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

BAER'S FURNITURE CO., INC.  
1589 NW 12TH AVENUE  
POMPANO, FL 33069

**New Mailing Address:**

**FEI Number:** 04-3793332

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAER, RONALD W  
BAER'S FURNITURE CO., INC.  
1589 NW 12TH AVENUE  
POMPANO, FL 33069 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:** MGR  
**Name:** BAER, IRA J  
**Address:** 1589 NW 12TH AVENUE  
**City-St-Zip:** POMPANO BEACH, FL 33069

**Title:** MGR  
**Name:** BAER, LAURENCE E  
**Address:** 1589 NW 12TH AVENUE  
**City-St-Zip:** POMPANO BEACH, FL 33069

I hereby 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:** IRA J. BAER

MGR

01/13/2010

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