2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000044845

1. Entity Name
J.B. FREY ENTERPRISES, L.L.C.

Principal Place of Business	Mailing Address
7011 DOMINION LN BRADENTON, FL 34202	7011 DOMINION LN BRADENTON, FL 34202

DO NOT WRITE IN THIS SPACE

04292008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
42-1636414
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

FREY, BRIAN M
7011 DOMINION LN
BRADENTON, FL 34202

DO NOT WRITE IN THIS SPACE

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)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.76

U00000046931
05/30/08-80063-010 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	FREY, BRIAN M
STREET ADDRESS	7011 DOMINION LN
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	MGRM
NAME	FREY, JENNIFER M
STREET ADDRESS	7011 DOMINION LN
CITY-ST-ZIP	BRADENTON, FL 34202
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Brian M. Frey Jennifer M. Frey 4/30/08 941 536 0868
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

BRIAN M. Frey Jennifer M. Frey