

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90129 005 ***142.75

DOCUMENT # L04000058306

1. Entity Name
JABRA, LLC.



Principal Place of Business
**4610 HIDDEN RIVER ROAD
SARASOTA, FL 34240 US**

Mailing Address
**4610 HIDDEN RIVER ROAD
SARASOTA, FL 34240 US**

DO NOT WRITE IN THIS SPACE

03242008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-1459517

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CASON, NANCY JD
1900 RINGLING BLVD
SARASOTA, FL 34239**

**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

Jane Grandbouche - Nancy Carson

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
GRANDBOUCHE, BRAD D
4610 HIDDEN RIVER ROAD
SARASOTA, FL 34240**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
GRANDBOUCHE, JANE B
4610 HIDDEN RIVER ROAD
SARASOTA, FL 34240**

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Jane B Grandbouche

Date

March 24, 2008

Daytime Phone #

941 321-8852