

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063013

Entity Name: JVS STONE SUPPLY, LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

3425 SW 74TH AVENUE
#A
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

3425 SW 74TH AVENUE
#A
OCALA, FL 34474 US

New Mailing Address:

FEI Number: 33-1099809

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

SCHNEEWEISS, RALPH
13834 SW 114 AVENUE
DUNNELLON, FL 34432 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: RALPH SCHNEEWEISS

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROUSE, HARVEY
Address: 12680 SW 48TH LANE ROAD
City-St-Zip: OCALA, FL 34481 US

Title: MGRM () Delete
Name: ROUSE, ROBERTA
Address: 12680 SW 48TH LANE ROAD
City-St-Zip: OCALA, FL 34481 US

Title: MGRM () Delete
Name: ROUSE, FRANK
Address: 12727 SW 48TH LANE ROAD
City-St-Zip: OCALA, FL 33481 US

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:

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: FRANK ROUSE

MGR

04/27/2009

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