

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022421

Entity Name: CRABBY J'S, LLC

FILED
Jan 25, 2009
Secretary of State

Current Principal Place of Business:

4287 BELLAIRE ROAD
SPRING HILL, FL 34604

New Principal Place of Business:

4287 BELLAIRE ROAD
SPRING HILL, FL 34607

Current Mailing Address:

4287 BELLAIRE ROAD
SPRING HILL, FL 34604

New Mailing Address:

4287 BELLAIRE ROAD
SPRING HILL, FL 34607

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICOLAI, JOSEPH M
4287 BELLAIRE ROAD
SPRING HILL, FL 34604 US

Name and Address of New Registered Agent:

NICOLAI, JOSEPH M
4287 BELLAIRE ROAD
SPRING HILL, FL 34607 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:

01/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: NICOLAI, JOSEPH
Address: 4287 BELLAIRE DR.
City-St-Zip: SPRING HILL, FL 34607

Title: D () Delete
Name: COMER, JOHN
Address: 7 TILDEN PLACE
City-St-Zip: NORWOOD, NJ 07648

Title: D () Delete
Name: KRABEL, JEFF
Address: 2271 CULBREATH RD
City-St-Zip: BROOKSVILLE, FL 34602

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: JOSEPH NICOLAI

P

01/25/2009

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