

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068678

Entity Name: JABRUSCO LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

11864 CAMDEN ROAD
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

11864 CAMDEN ROAD
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 20-3142606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SEIDEL, JIM
11864 CAMDEN ROAD
JACKSONVILLE, FL 32218 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SEIDEL, JIM
Address: 5110 BRIDLEWOOD CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Delete
Name: MARTZ, BRUCE
Address: 3840 CALICO TRAIL
City-St-Zip: JACKSONVILLE, FL 32277

Title: MGRM () Delete
Name: RUBENSTEIN, SCOTT
Address: 740 MILL STREAM ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: BRUCE W. MARTZ

MGMR

05/01/2007

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