

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068928

Entity Name: JSL PROPERTIES, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

5296 NW ALMOND AVE
PORT ST LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

906 SW ST LUCIE WEST BLVD
#308
PORT ST LUCIE, FL 34986 US

New Mailing Address:

5296 NW ALMOND AVE
PORT ST LUCIE, FL 34986 US

FEI Number: 20-4108707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ELITE TAX SERVICES, INC.
800 VILLAGE SQUARE CROSSING
SUITE #120
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

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: LARRICK, JEFFERY S
Address: 5296 NW ALMOND AVE
City-St-Zip: PORT ST LUCIE, FL 34986 US

Title: MGRM () Delete
Name: JOHNSON, SAITIP
Address: 5296 NW ALMOND AVE
City-St-Zip: PORT ST LUCIE, FL 34986 US

ADDITIONS/CHANGES:

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: JEFFERY S LARRICK

MGRM

04/29/2009

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