

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069443

Entity Name: JITTERBUG KIDS, LLC

FILED
May 24, 2008
Secretary of State

Current Principal Place of Business:

11524 CLAYMONT CIRCLE
WINDERMERE, FL 34786

New Principal Place of Business:

6464 LAKE BURDEN VIEW DRIVE
WINDERMERE, FL 34786

Current Mailing Address:

11524 CLAYMONT CIRCLE
WINDERMERE, FL 34786

New Mailing Address:

6464 LAKE BURDEN VIEW DRIVE
WINDERMERE, FL 34786

FEI Number: 20-3151645 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:

WALKER, AMARA
11524 CLAYMONT CIRCLE
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

WALKER, AMARA
6464 LAKE BURDEN VIEW DRIVE
WINDERMERE, FL 34786 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: AMARA WALKER

05/24/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WALKER, AMARA
Address: 11524 CLAYMONT CIRCLE
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM () Delete
Name: WALKER, CHRISTOPHER
Address: 11524 CLAYMONT CIRCLE
City-St-Zip: WINDERMERE, FL 34786

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: AMARA WALKER

MGMR

05/24/2008

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