

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075885

FILED
Aug 06, 2008
Secretary of State

Entity Name: JORDAN'S SERVICE AGENCY, LLC

Current Principal Place of Business:

6344 CARANN PLACE
BAKER, FL 32531 US

New Principal Place of Business:

4648 DOVE WAY
CRESTVIEW, FL 32539 US

Current Mailing Address:

6344 CARANN PLACE
BAKER, FL 32531 US

New Mailing Address:

4648 DOVE WAY
CRESTVIEW, FL 32539 US

FEI Number: 20-3245362 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:

JORDAN, JOSEPH K
6344 CARANN PLACE
BAKER, FL 32531 US

Name and Address of New Registered Agent:

JORDAN, JOSEPH K
4648 DOVE WAY
CRESTVIEW, FL 32539 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:

08/06/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JORDAN, JOSEPH K
Address: 6344 CARANN PLACE
City-St-Zip: BAKER, FL 32531 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JORDAN, JOSEPH K
Address: 4648 DOVE WAY
City-St-Zip: CRESTVIEW, FL 32539 US

Title: MGRM () Change (X) Addition
Name: LINDROS, DEBORAH A
Address: 4648 DOVE WAY
City-St-Zip: CRESTVIEW, FL 32539 US

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 K JORDAN

MGRM

08/06/2008

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