

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080412

Entity Name: JABOC DEVELOPMENT, LLC

FILED
May 14, 2007
Secretary of State

Current Principal Place of Business:

4767 NEW BROAD STREET
ORLANDO, FL 32814 US

New Principal Place of Business:

Current Mailing Address:

4767 NEW BROAD STREET
ORLANDO, FL 32814 US

New Mailing Address:

FEI Number: 20-5042296 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:

SOCARRAS, RAUL
4767 NEW BROAD STREET
ORLANDO, FL 32814 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: MGR () Delete
Name: SOCARRAS, RAUL
Address: 4767 NEW BROAD STREET
City-St-Zip: ORLANDO, FL 32814 US

Title: MGR () Delete
Name: MANGLARDI, MICHAEL
Address: 540 NORTH SEMORAN BOULEVARD
City-St-Zip: ORLANDO, FL 32807 US

Title: MGR () Delete
Name: BUSH, SHAWN
Address: 1724 WEST BROADWAY STREET
City-St-Zip: OVIEDO, FL 33461 US

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: RAUL SOCARRAS

MGR

05/14/2007

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