2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085357

MARLER, TRICIA

3279 REGAL CREST DRIVE

LONGWOOD, FL 32779

Name:

Address:

City-St-Zip:

Entity Name: JB SMYRNA, LLC

FILED Jul 12, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	GAL CREST DRIVE DOD, FL 32779			
Current Mailing Address:		New Mailing A	New Mailing Address:	
	SAL CREST DRIVE OOD, FL 32779			
In accordan	r: 41-3400386 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the limited liability d Address of Current Registered Agent	company did not receive the prior		
	PHILIP TH MAITLAND AVENUE, SUITE 340 D, FL 32751 US			
	e named entity submits this statement for t e of Florida.	he purpose of changing its reg	istered office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MR. () Delete REEVES, BARRY 3363 REGAL CREST DRIVE LONGWOOD, FL 32779	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MRS. () Delete REEVES, CINDY 3363 REGAL CREST DRIVE LONGWOOD, FL 32779	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MR. () Delete MARLER, ROBERT 3279 REGAL CREST DRIVE LONGWOOD, FL 32779	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	MRS. () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TRICIA MARLER MRS. 07/12/2007