

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096906

Entity Name: JAWAD FAMILY TRUST, LLC

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

2820 SE 3RD COURT  
SUITE 100  
OCALA, FL 34471 US

## New Principal Place of Business:

## Current Mailing Address:

2602 SW 19TH AVE RD  
SUITE 204-10  
OCALA, FL 34471 US

## New Mailing Address:

2820 SE 3RD COURT  
SUITE 100  
OCALA, FL 34471 US

FEI Number: 20-3577921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAWAD, TARIQ A  
2602 SW 19TH AVE RD  
SUITE 204-10  
OCALA, FL 34471 US

## Name and Address of New Registered Agent:

JAWAD, TARIQ A  
3101 SW 34TH AVE  
SUITE 905-437  
OCALA, FL 34474 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: TARIQ JAWAD

03/20/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: JAWAD, MUHAMMAD A  
Address: 2820 SE 3RD COURT SUITE 100  
City-St-Zip: OCALA, FL 34471 US

Title: MGRM ( ) Delete  
Name: JAWAD, TARIQ A  
Address: 2820 SE 3RD CT SUITE 100  
City-St-Zip: OCALA, FL 34471 US

Title: MGRM ( ) Delete  
Name: JAWAD, OMAR A  
Address: 2820 SE 3RD CT SUITE 100  
City-St-Zip: OCALA, FL 34471 US

Title: MGRM ( ) Delete  
Name: JAWAD, REEM A  
Address: 2820 SE 3RD CT SUITE 100  
City-St-Zip: OCALA, FL 34471 US

Title: MGRM ( ) Delete  
Name: JAWAD, AMIR A  
Address: 2820 SE 3RD CT SUITE 100  
City-St-Zip: OCALA, FL 34471 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:

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: TARIQ JAWAD

MGRM

03/20/2009

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