

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105483

Entity Name: SARAH JANE FAMILY L.L. C.

FILED  
May 30, 2008  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 1974  
DELEON SPRINGS, FL 32130 US

**New Principal Place of Business:**

1255 SEMINOLE DR  
DELEON SPRINGS, FL 32130 US

**Current Mailing Address:**

P.O. BOX 1974  
DELEON SPRINGS, FL 32130 US

**New Mailing Address:**

FEI Number: 65-1264522      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:**

O'BRIEN, ERIN K  
929 N. SPRING GARDEN AVE.  
SUITE 115  
DELAND, FL 32720 US

**Name and Address of New Registered Agent:**

CENSOPLANO, KAMI  
5840 WEST ST  
DELEON SPRINGS, FL 32130 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: KAMI CENSOPLANO

05/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CENSOPLANO, KAMI  
Address: P.O. BOX 1974  
City-St-Zip: DELEON SPRINGS, FL 32130

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MARTIN, MELVIN  
Address: PO BOX 1934  
City-St-Zip: DELEON SPRINGS, FL 32130

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: MELVIN MARTIN

MGR

05/30/2008

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