

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000112730

Entity Name: JACOB ABRAHAM, LLC

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2815 E HENRY AVENUE  
SUITE B-4  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5449  
TAMPA, FL 33675

**New Mailing Address:**

FEI Number: 20-3787937

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEAN, POOLE  
4161 E 7TH AVE  
TAMPA, FL 33605 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: MGRM  
Name: SCHMITT, DAVID A JR  
Address: 4503 HICKORY LN  
City-St-Zip: BRANDON, FL 33511 US

Title: MGRM  
Name: MALOUF, JASON F  
Address: 3107 MOSSVALE LANE  
City-St-Zip: TAMPA, FL 33618 US

Title: MGRM  
Name: HYER, RAYMOND T  
Address: 4129 SALTWATER BLVD  
City-St-Zip: TAMPA, FL 33615 US

I hereby 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: SEAN POOLE

CFO

02/13/2012

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