

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000079378

FILED
Apr 21, 2009
Secretary of State

Entity Name: JONES FAMILY TRUST, LLC

Current Principal Place of Business:

103 5TH AVENUE
HOWEY-IN-THE-HILLS, FL 34737 US

New Principal Place of Business:

Current Mailing Address:

103 5TH AVENUE
HOWEY-IN-THE-HILLS, FL 34737 US

New Mailing Address:

FEI Number: 51-0633171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CYRUS, ROBERT R
214 NORTH THIRD STREET
A
LEESBURG, FL 34748 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 () Delete
Name: HINCKLEY, PATRICIA J
Address: 103 5TH AVENUE
City-St-Zip: HOWEY-IN-THE-HILLS, FL 34737 US

Title: MGRM () Delete
Name: JONES, GREGORY A
Address: 319 WEST CENTRAL AVENUE
City-St-Zip: BUSHNELL, FL 33513 US

ADDITIONS/CHANGES:

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: PATRICIA J. HINCKLEY

MGRM

04/21/2009

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