2008 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

DOCUMENT # L06000091368

1. Entity Name

JACK SOBCZAK, LLC

Principal Place of Business

13025 27TH DRIVE WELLBORN, FL 32094



Mailing Address

13025 27TH DRIVE WELLBORN, FL 32094

FILED Feb 26, 2008 08:00 Al Secretary of State



01172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For 06-1793854 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

SOBCZAK, JOHN A 13025 27TH DRIVE WELLBORN, FL 32094

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8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE	John A 60BC2AK Signature, typed or printed name of registered agent and title if applicable	MNOTE Registered Agentalignature required when remetating) DATE
FILE NOW!!! FEE IS \$138.75 — After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SOBCZAK, JOHN A 13025 27TH DRIVE WELLBORN, FL 32094	000000840464 03/06/08-80047-013 138.75
NAME STREET ADDRESS CITY-SY-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
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NAME STREET ADDRESS CITY-ST-ZIP		, have the same of

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: VBhu 4 50BL2 AL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

John of Edge

2308

<u> 386-963-3487</u>