


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT


FILED
Apr 22, 2008 8:00 am
Secretary of State

04-22-2008 90096 042 ***138.75

DOCUMENT # L07000000093	
1. Entity Name JACOBS CAPITAL PARTNERS, LLC	

Principal Place of Business 1800 SECOND STREET, STE. 882 SARASOTA, FL 34236	Mailing Address 1800 SECOND STREET, STE. 882 SARASOTA, FL 34236
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DO NOT WRITE IN THIS SPACE



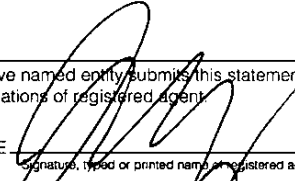
03272008 No Chg-LLC	CR2E083 (12/07)
4. FEI Number 20-8121627	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COMPTON, JOHN M
 1819 MAIN STREET, STE. 610
 SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE

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  COO DATE 4/18/08

(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

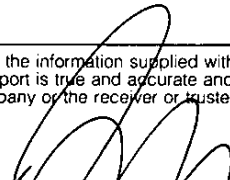
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BEVERLY MANAGEMENT, LLC 1800 SECOND STREET, STE. 882 SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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11. 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:  COO DATE 4/18/08 941-953-9922

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #