

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000007903

FILED
Jan 06, 2009
Secretary of State

Entity Name: JUALS CLASSROOM LIBRARIES, LLC

Current Principal Place of Business:

1655 S. HIGHLAND AVENUE
D142
CLEARWATER, FL 33756 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4397
CLEARWATER, FL 33758 US

New Mailing Address:

FEI Number: 41-2225294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, ALLISON L
1655 S. HIGHLAND AVE.
D142
CLEARWATER, FL 33756 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: MGR () Delete
Name: BROWN, ALLISON L
Address: 1655 S. HIGHLAND AVE. D142
City-St-Zip: CLEARWATER, FL 33756 US

Title: MGR () Delete
Name: JONES, JULIE C
Address: 1231 ROSEWOOD STREET
City-St-Zip: LARGO, FL 33770 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: ALLISON BROWN

MS.

01/06/2009

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