

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000027646

Entity Name: CHA-JAC SALES, LLC

FILED
May 17, 2009
Secretary of State

Current Principal Place of Business:

15115 STATE RD 62
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

P O BOX 451
PARRISH, FL 34219

New Mailing Address:

FEI Number: 02-0802946 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

POWELL, CHARLOTTE A
15115 STATE RD 62
PARRISH, FL 34219 US

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: POWELL, CHARLOTTE A
Address: P O BOX 451
City-St-Zip: PARRISH, FL 34219

Title: MGR () Delete
Name: POWELL, JACK P
Address: P O BOX 451
City-St-Zip: PARRISH, FL 34219

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: CHARLOTTE POWELL

MGRM

05/17/2009

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