

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000039444

Entity Name: JBS MANAGEMENT, LLC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

1551 2ND STREET
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1551 2ND STREET
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-8845657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPNICK, BRUCE P ESQ.
2033 MAIN STREET
SUITE 600
SARASOTA, FL 34237 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: SEDACCA, JEFFREY B
Address: 1551 2ND STREET
City-St-Zip: SARASOTA, FL 34236

Title: P () Delete
Name: SEBACCA, JEFFREY B
Address: 1551 2ND ST
City-St-Zip: SARASOTA, FL 34236

Title: V () Delete
Name: ESSENFELD, HOWARD P
Address: 1551 2ND ST
City-St-Zip: SARASOTA, FL 34236

Title: S () Delete
Name: ESSENFELD, HOWARD
Address: 1551 2ND ST
City-St-Zip: SARASOTA, FL 34236

Title: T () Delete
Name: SEDACCA, JEFFREY B
Address: 1551 2ND ST
City-St-Zip: SARASOTA, FL 34236

Title: AT () Delete
Name: ESSENFELD, HOWARD P
Address: 1551 2ND ST
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: ESSENFELD, HOWARD P
Address: 277 INDIAN HEAD ROAD
City-St-Zip: KINGS PARK, NY 11754

Title: S (X) Change () Addition
Name: ESSENFELD, HOWARD
Address: 277 INDIAN HEAD ROAD
City-St-Zip: KINGS PARK, NY 11754

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: ESSENFELD, HOWARD P
Address: 277 INDIAN HEAD ROAD
City-St-Zip: KINGS PARK, NY 11754

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: HOWARD P. ESSENFELD

S

04/23/2009

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