## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000072203

Entity Name: JAYCORE, LLC.

**FILED** Mar 23, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

13820 OLD ST. AUGUSTINE RD., STE. 113-294 13820 OLD ST. AUGUSTINE RD., STE. 113-294 JACKSONVILLE, FL 32258

STE 113-294

JACKSONVILLE, FL 32258

**Current Mailing Address:** New Mailing Address:

13820 OLD ST. AUGUSTINE RD., STE. 113-294 13820 OLD ST. AUGUSTINE RD., STE. 113-294

STE 113-294

JACKSONVILLE, FL 32258

FEI Number: 56-2660029 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JAY, BYRON 4620 SUNBEAM STATION COURT JACKSONVILLE, FL 32257

JACKSONVILLE, FL 32258

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: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

JAY, BYRON Name: Name: Address: 4620 SUNBEAM STATION COURT Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

Name: GEANS, DORINDA Name: Address: 4620 SUNBEAM STATION COURT Address: City-St-Zip: JACKSONVILLE, FL 32257 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: BYRON JAY **MGRM** 03/23/2008