

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000110394

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: J.S. INVESTMENT OF FLORIDA, L.L.C.

**Current Principal Place of Business:**

17520 DEVORE LN  
FORT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

17520 DEVORE LN  
FORT MYERS, FL 33913

**New Mailing Address:**

FEI Number: 26-1386565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMW OF SW FLORIDA, P.A.  
17520 DEVORE LN  
FORT MYERS, FL 33913 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: SMW OF SW FLORIDA, P. .A.  
Address: 17520 DEVORE LN  
City-St-Zip: FORT MYERS, FL 33913 US

Title: MGRM ( ) Delete  
Name: CHOUINARD & COMPANY,, P.A.  
Address: 5305 SW 26TH AVE  
City-St-Zip: CAPE CORAL, FL 33914 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: CHOUINARD & COMPANY

MGMR

04/30/2008

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