

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112265

Entity Name: JTF HOLDINGS LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1321 ROWANTREE DR
DOVER, FL 33527

New Principal Place of Business:

Current Mailing Address:

1321 ROWANTREE DR
DOVER, FL 33527

New Mailing Address:

FEI Number: 26-1362483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALEK, FRANCIS X IV
1321 ROWANTREE DR
DOVER, FL 33527 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: BRODIE, JAMES
Address: 12206 CREEKEDGE DR
City-St-Zip: RIVERVIEW, FL 33569

Title: MGR () Delete
Name: PALEK, FRANCIS X IV
Address: 1321 ROWANTREE DR
City-St-Zip: DOVER, FL 33527

Title: MGR () Delete
Name: TROUT, TODD C
Address: 6637 SUMMER HAVEN DR
City-St-Zip: RIVERVIEW, FL 33569

Title: MGR () Delete
Name: JTF HOLDINGS INC
Address: 1321 ROWANTREE DR
City-St-Zip: DOVER, FL 33527

ADDITIONS/CHANGES:

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

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

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: FRANCIS X PALEK IV

MGR

04/28/2009

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