

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117005

Entity Name: JRE ENTERPRISES USA LLC

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

5418 CREPE MYRTLE CIRCLE
KISSIMMEE, FL 34758

New Principal Place of Business:

4113 CANNON COURT
KISSIMMEE, FL 34746

Current Mailing Address:

5418 CREPE MYRTLE CIRCLE
KISSIMMEE, FL 34758

New Mailing Address:

4113 CANNON COURT
KISSIMMEE, FL 34746

FEI Number: 74-3240724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELWELL, JEFFREY W
5418 CREPE MYRTLE CIRCLE
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

ELWELL, JEFFREY W
4113 CANNON COURT
KISSIMMEE, FL 34746 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:

02/04/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ELWELL, JEFFREY W
Address: 5418 CREPE MYRTLE CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

Title: MGRM (X) Delete
Name: ELWELL, RICHARD J
Address: 5418 CREPE MYRTLE CIRCLE
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ELWELL, JEFFREY W
Address: 4113 CANNON COURT
City-St-Zip: KISSIMMEE, FL 34746

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: JEFFREY WILLIAM ELWELL

MGRM

02/04/2009

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