

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000003539

Entity Name: JAMBAR, LLC

FILED  
Mar 22, 2009  
Secretary of State

## Current Principal Place of Business:

6245 HEDGESPARROWS LANE  
SANFORD, FL 32771

## New Principal Place of Business:

## Current Mailing Address:

6245 HEDGESPARROWS LANE  
SANFORD, FL 32771

## New Mailing Address:

FEI Number: 26-1726947

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARNES, LOFTON JR  
6245 HEDGESPARROWS LANE  
SANFORD, FL 32771 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: JAMES, GREG  
Address: 6245 HEDGESPARROWS LANE  
City-St-Zip: SANFORD, FL 32771

Title: MGRM ( ) Delete  
Name: JAMES, TRACIA  
Address: 6245 HEDGESPARROWS LANE  
City-St-Zip: SANFORD, FL 32771

Title: MGRM ( ) Delete  
Name: BARNES, LOFTON JR  
Address: 6245 HEDGESPARROWS LANE  
City-St-Zip: SANFORD, FL 32771

Title: MGRM ( ) Delete  
Name: BARNES, JENNIFER  
Address: 6245 HEDGESPARROWS LANE  
City-St-Zip: SANFORD, FL 32771

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: JAMES, GREG  
Address: 1469 WESCOTT LOOP  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM (X) Change ( ) Addition  
Name: JAMES, TRACIA  
Address: 1469 WESCOTT LOOP  
City-St-Zip: WINTER SPRINGS, FL 32708

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: JENNIFER WOODLE-BARNES

MGRM

03/22/2009

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