

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000096433

FILED  
Jan 24, 2009  
Secretary of State

**Entity Name:** OLIVE BRANCH ENTERPRISES - AKELS, LLC

**Current Principal Place of Business:**

11598 COLLINS CREEK DR  
JACKSONVILLE, FL 32258

**New Principal Place of Business:**

**Current Mailing Address:**

11598 COLLINS CREEK DR  
JACKSONVILLE, FL 32258

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

AKEL, JAMEEL  
11598 COLLINS CREEK DR  
JACKSONVILLE, FL 32258 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: MGR ( ) Delete  
Name: AKEL, JAMEEL Y  
Address: 11598 COLLINS CREEK DR  
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGRM ( ) Delete  
Name: AKEL, YACoub J  
Address: 11670 ALEXIS FOREST DR  
City-St-Zip: JACKSONVILLE, FL 32258

**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: YACoub AKEL

MGRM

01/24/2009

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