

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000034604

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Entity Name:** JAC ENTERPRISES OF BROWARD, LLC

**Current Principal Place of Business:**

3590 N.W. 54TH STREET, SUITE 1  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

10220 W. STATE RD. 84  
SUITE #9  
DAVIE, FL 33324

**Current Mailing Address:**

10220 STATE ROAD 84, #9  
DAVIE, FL 33324

**New Mailing Address:**

10220 W. STATE RD. 84  
SUITE #9  
DAVIE, FL 33324

**FEI Number:** 27-2242270

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COMBS, RICHARD E  
3590 N.W. 54TH STREET, SUITE 1  
FT. LAUDERDALE, FL 33309 US

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

COMBS, RICHARD E  
10220 W. STATE RD. 84  
SUITE #9  
DAVIE, FL 33324 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:

01/20/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: COMBS, RICHARD E  
Address: 2091 S.W. 52ND WAY  
City-St-Zip: PLANTATION, FL 33317

Title: MGR  
Name: COMBS, JUDITH L  
Address: 2091 S.W. 52ND WAY  
City-St-Zip: PLANTATION, FL 33317

I hereby 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: JUDITH L. COMBS

MGR

01/20/2011

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