

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000084315

Entity Name: JCANDE, LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

13937 PERDIDO KEY DRIVE  
APT #1703  
PENSACOLA, FL 32507 US

**New Principal Place of Business:**

**Current Mailing Address:**

2801 N GUM CT  
BROKEN ARROW, OK 74012 US

**New Mailing Address:**

FEI Number: 27-3340145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANDERSON, JOHN C  
13937 PERDIDO KEY DRIVE  
APT #1703  
PENSACOLA, FL 32507 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  
Name: ANDERSON, JOHN C  
Address: 2801 N GUM CT  
City-St-Zip: BROKEN ARROW, OK 74012 US

Title: MGR  
Name: ANDERSON, JANICE B  
Address: 2801 N GUM CT  
City-St-Zip: BROKEN ARROW, OK 74012 US

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: JOHN C. ANDERSON

MR

01/04/2012

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