2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000005446

1. Entity Name
JABIL TEXAS HOLDINGS, LLC



FILED Mar 20, 2008 08:00 A Secretary of State

Principal Place of Business

10560 9TH ST. N ST. PETERSBURG, FL 33416 Mailing Address

10560 9TH ST. N

ST. PETERSBURG, FL 33416



03132008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3670065

Applied For Not Applicable

5. Certificate of Status Desired

X

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

	The above named entity submits this statement for the purpose of chan	ging its registered office or registered agent, or bo	th, in the State of Florida.	I am familiar with, and accept
1	the obligations of registered agent.		U00000864	4926
SIG	NATURE		04707709-900	007-005 142 75
	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	and the second of the second o	DATE DOD 170+10

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JABIL CIRCUIT, INC. 10560 9TH ST. NORTH ST. PETERSBURG, FL 33716	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP		

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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 empoyered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED O

PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

raio A. Cadavid

3-14-08

Daytime Phone #