

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000340

FILED
Mar 25, 2009
Secretary of State

Entity Name: NB JACKSONVILLE-ST. JOHNS, LLC

Current Principal Place of Business:

4663 RIVER CITY DRIVE, SUITE 107
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

1145 ZONOLITE ROAD
SUITE 9
ATLANTA, GA 30306 US

New Mailing Address:

FEI Number: 38-3713593 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PARKER, STEPHANIE
4663 RIVER CITY DRIVE, SUITE 107
JACKSONVILLE, FL 32246 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: NATURAL BODY INTERNA, TIONAL, INC.
Address: 1145 ZONOLITE ROAD, SUITE 9
City-St-Zip: ATLANTA, GA 30306

ADDITIONS/CHANGES:

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: CICI COFFEE ON BEHALF OF NATURAL BODY INTE CEO 03/25/2009

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