

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010965

Entity Name: JAKAB MANAGEMENT SERVICE, L.L.C.

Current Principal Place of Business:

666 N.E. DIXIE HIGHWAY
JENSEN BEACH, FL 34957

Current Mailing Address:

PO BOX 111
JENSEN BEACH, FL 34958

FEI Number: 65-1114307

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAKAB, JOESPH JJR.
666 N.E. DIXIE HIGHWAY
JENSEN BEACH, FL 34957 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name JAKAB, JOSEPH JJR.
Address 666 N.E. DIXIE HIGHWAY
City-State-Zip: JENSEN BEACH FL 34957

Title MGRA
Name BUTLER, NANCY
Address 579 SE MEADOW WOOD WAY
City-State-Zip: STUART FL 34997

Title MGRA
Name JAKAB, TIMOTHY
Address 6151-6 RIVER WALK LANE
City-State-Zip: JUPITER FL 33458

Title MGRA
Name JAKAB, SCOTT
Address 7 SAILFISH DR
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title MGR
Name BRECHBILL, SCOTT
Address 319 SW 3RD STREET
City-State-Zip: STUART FL 34994

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH J JAKAB JR

MANAGER

04/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date