

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000026611

**Entity Name:** JABS CSC, LLC

**Current Principal Place of Business:**

6901 SOUTHEAST 14TH COURT  
OCALA, FL 34480

**Current Mailing Address:**

6901 SOUTHEAST 14TH COURT  
OCALA, FL 34480 US

**FEI Number:** 84-4507702

**Certificate of Status Desired:** No

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

MCKINNON, NOAH  
595 W GRANADA, BLVD  
ORMOND BEACH, FL 32174 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 AMBR  
Name OSBORN, BRYAN J  
Address 6901 SOUTHEAST 14TH COURT  
City-State-Zip: Ocala FL 34480

Title AMBR  
Name OSBORN, LISA H  
Address 6901 SOUTHEAST 14TH COURT  
City-State-Zip: Ocala FL 34480

*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:** BRYAN OSBORN

AMBR

07/11/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date