



LIMITED LIABILITY COMPANY ANNUAL REPORT

10/2017

NAME OF LIMITED LIABILITY COMPANY: JTB LLC

SECRETARY OF STATE ID NUMBER: 1833492

STATE OF FORMATION: NC

REPORT FOR THE CALENDAR YEAR: 2020

Filing Office Use Only

E - Filed Annual Report

1833492

CA202009809922

4/7/2020 04:45

☐ Changes

SECTION A: REGISTERED AGENT'S INFORMATION

1. NAME OF REGISTERED AGENT: McGirt, Rickey

2. SIGNATURE OF THE NEW REGISTERED AGENT: _____

SIGNATURE CONSTITUTES CONSENT TO THE APPOINTMENT

3. REGISTERED AGENT OFFICE STREET ADDRESS & COUNTY 4. REGISTERED AGENT OFFICE MAILING ADDRESS

14373 Hwy 71

14373 Hwy 71

Shannon, NC 28386 Robeson County

Shannon, NC 28386

SECTION B: PRINCIPAL OFFICE INFORMATION

1. DESCRIPTION OF NATURE OF BUSINESS: home rentals

2. PRINCIPAL OFFICE PHONE NUMBER: (770) 367-8904

3. PRINCIPAL OFFICE EMAIL: Privacy Redaction

4. PRINCIPAL OFFICE STREET ADDRESS

5. PRINCIPAL OFFICE MAILING ADDRESS

7197 Wildflower Walk

7197 Wildflower Walk

Winston, GA 30187

Winston, GA 30187

6. Select one of the following if applicable. (Optional see instructions)



The company is a veteran-owned small business



The company is a service-disabled veteran-owned small business

SECTION C: COMPANY OFFICIALS (Enter additional company officials in Section E.)

NAME: william joseph brock

NAME: tamera brock

NAME: _____

TITLE: Manager

TITLE: Manager

TITLE: _____

ADDRESS: _____

ADDRESS: _____

ADDRESS: _____

7197 wildflower walk

7197 wildflower walk

winston, GA 30187

winston, GA 30187

SECTION D: CERTIFICATION OF ANNUAL REPORT. Section D must be completed in its entirety by a person/business entity.

william joseph brock

4/7/2020

SIGNATURE

DATE

Form must be signed by a Company Official listed under Section C of This form.

william joseph brock

Manager

Print or Type Name of Company Official

Print or Type Title of Company Official

This Annual Report has been filed electronically.

MAIL TO: Secretary of State, Business Registration Division, Post Office Box 29525, Raleigh, NC 27626-0525