2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008432

Entity Name: J.C., L.L.C.

FILED Jul 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

971 MICHIGAN AVENUE 5621 STRAND BLVD. NAPLES, FL 34103

SUITE 211

NAPLES, FL 34110

Current Mailing Address: New Mailing Address:

971 MICHIGAN AVENUE 5621 STRAND BLVD. NAPLES, FL 34103 SUITE 211

NAPLES, FL 34110

FEI Number: 02-0637973 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

EVANS, JAMES EVANS, JAMES 971 MICHIGAN AVENUE 5621 STRAND BLVD. SUITE 211 NAPLES, FL 34103 NAPLES, FL 34110 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: 07/18/2006

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change () Addition () Delete

EVANS, JAMES M Name: Name: EVANS, JAMES M Address: 971 MICHIGAN AVENUE Address: 5621 STRAND BLVD., #211 City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34110

Title: MGRM Title: () Change () Addition () Delete

Name: EVANS, JON Name: Address: 378 INTERSTATE COURT Address: City-St-Zip: SARASOTA, FL 34240 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES EVANS **MGRM** 07/18/2006