

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000047252

1. Entity Name
 JUPITER ATLANTIC II LLC



Principal Place of Business
 13574 RHONE DRIVE
 PALM BEACH GARDENS, FL 33410

Mailing Address
 PMS 303
 5500 MILITARY TRAIL, SUITE 22
 JUPITER, FL 33458 US



01042006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 80-0111682

Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MANN, THOMAS A
 13574 RHONE DRIVE
 PALM BEACH GARDENS, FL 33458

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

Filing Fee is \$50.00
 Due by May 1, 2006

1100000398269
 01/30/06-80089-010 50.00

MANAGING MEMBERS/MANAGERS

NAME	MGR MANN, THOMAS A
STREET ADDRESS	13574 RHONE DRIVE
CITY-STATE-ZIP	PALM BEACH GARDENS, FL 33410
NAME	MGR MICHEL, BENO M.D.
STREET ADDRESS	5 HAMPTON COURT
CITY-STATE-ZIP	BEACHWOOD, OH 44122
NAME	MGR MANN, DIANN G
STREET ADDRESS	13574 RHONE DRIVE
CITY-STATE-ZIP	PALM BEACH GARDENS, FL 33410
NAME	MGR MICHEL, ELAINE
STREET ADDRESS	5 HAMPTON COURT
CITY-STATE-ZIP	BEACHWOOD, OH 44122
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DATE

Daytime Phone #

Thomas A. Mann 1/5/2006