

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067137

FILED
Jan 23, 2006
Secretary of State

Entity Name: JR PROPERTIES, LLC

Current Principal Place of Business:

5810 S. U.S. HIGHWAY 1
VIERA, FL 32955 US

New Principal Place of Business:

5810 S. U.S. HIGHWAY 1
ROCKLEDGE, FL 32955 US

Current Mailing Address:

5810 S. U.S. HIGHWAY 1
VIERA, FL 32955 US

New Mailing Address:

5810 S. U.S. HIGHWAY 1
ROCKLEDGE, FL 32955 US

FEI Number: 20-1807215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHILLINGER, CHARLES A ESQUIRE
1311 BEDFORD DRIVE
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RUTSTEIN, JULES
Address: 5810 S. U.S. HIGHWAY 1
City-St-Zip: VIERA, FL 32955 US

Title: MGRM () Delete
Name: RUTSTEIN, JUDI
Address: 5810 S. U.S. HIGHWAY 1
City-St-Zip: VIERA, FL 32955 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RUTSTEIN, JULES
Address: 5810 S. U.S. HIGHWAY 1
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MGRM (X) Change () Addition
Name: RUTSTEIN, JUDI
Address: 5810 S. U.S. HIGHWAY 1
City-St-Zip: ROCKLEDGE, FL 32955 US

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: JULES RUTSTEIN

MGRM

01/23/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date