

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2002 8:00 am
Secretary of State

04-01-2002 90727 030 ****50.00

DOCUMENT # M01000002834
1. Entity Name
JAC PROPERTY MANAGEMENT, L.L.C.

27224

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

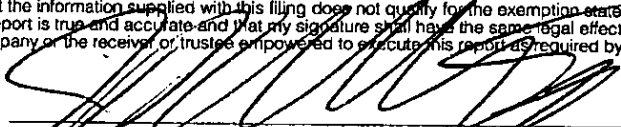
7. Name and Address of Current Registered Agent --
Name: Theodore K. Egner
Street Address (P.O. Box Number is Not Acceptable):
3067 East Commercial Boulevard
City Fort Lauderdale FL Zip Code 33308

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FEE IS \$50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Joseph A. Citta	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member 63 Cranmoor Drive, Toms River, N.J
TITLE NAME STREET ADDRESS CITY-ST-ZIP	J. Phillip Citta	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member 698 Hooper Avenue, Toms River, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marie Roselli	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member 585. Brookside Drive, Toms River, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  DATE: 2/12/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE
J. PHILLIP CITTA, MANAGING MEMBER Date Daytime Phone #

Attachment
2/22/24

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE #MB1000062834

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

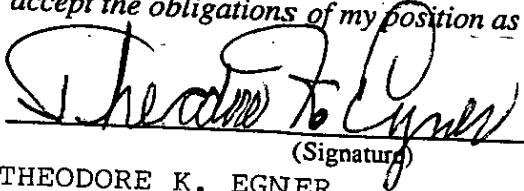
ETAC Property Management LLC

2. The name and the Florida street address of the registered agent and office are:

THEODORE K. EGNER
(Name)

3067 East Commercial Boulevard
Florida street address (P.O. Box **NOT** ACCEPTABLE)
Fort Lauderdale, Florida 33308
FL
City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


(Signature)
THEODORE K. EGNER

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)