2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000009082

1. Entity Name
JMG COMMERCIAL PROPERTIES LLC

Principal Place of Business.	Mailing Address
5401 TAYLOR RD UNIT #2 NAPLES, FL 34109	5401 TAYLOR RD UNIT #2 NAPLES, FL 34109

DO NOT WRITE IN THIS SPACE

01112005No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
02-0584168	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GUITARD, JULIE C
9698 OXFORD ST.
NAPLES, FL 34109

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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. 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 reinstating)   DATE 1/10/2005

Filing Fee is $50.00
Due by May 1, 2005

U00000182290
01/19/05-80022-003 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	GUITARD, JOHN
STREET ADDRESS	5401 TAYLOR RD UNIT #2
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	MGRM
NAME	GUITARD, MIGUEL
STREET ADDRESS	5401 TAYLOR RD UNIT #2
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____   1/10/2005   239-289-6644
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #