

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000015604

**Entity Name:** JEPACON LLC

**Current Principal Place of Business:**

49 ST GEORGE PLACE  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

49 ST GEORGE PLACE  
PALM BEACH GARDENS, FL 33418

**FEI Number:** 80-0544431

**Certificate of Status Desired:** No

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

CONSTANTINE, PAUL JSR.  
49 ST GEORGE PLACE  
PALM BEACH GARDENS, FL 33418 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MR.  
Name CONSTANTINE, PAUL J  
Address 49 ST. GEORGE PLACE  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title MR  
Name CONSTANTINE, PAUL JJR  
Address 103 LAZY WILLOW CT.  
City-State-Zip: WILLIAMSTON SC 29673

Title DR.  
Name CONSTANTINE, JEFFREY C  
Address 6246 HERITAGE PLACE  
City-State-Zip: CHARLOTTE NC 28213

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PAUL J. CONSTANTINE

**REGISTERED AGENT**

**02/17/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date