

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000003093

1. Entity Name
JRG, L.L.C.



Principal Place of Business

861 JUPITER PARK DR
SUITE A
JUPITER, FL 33458 US

Mailing Address

861 JUPITER PARK DR
SUITE A
JUPITER, FL 33458 US

DO NOT WRITE IN THIS SPACE



02022004No Chg-LLC

CR2E083 (10/03)

4. FEI Number
65-1008656

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FHS CORPORATE SERVICES, INC.
11780 US HIGHWAY ONE
SUITE 300
NORTH PALM BEACH, FL 33408

**DO NOT WRITE
IN THIS SPACE**

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 _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME GAUDET, JOSEPH E
STREET ADDRESS 861 JUPITER PARK DRIVE SUITE A
CITY - ST - ZIP JUPITER, FL 33458

TITLE MGR
NAME GAUDET, JOSEPH E III
STREET ADDRESS 861 JUPITER PARK DRIVE SUITE A
CITY - ST - ZIP JUPITER, FL 33458

TITLE MGR
NAME GAUDET, ROBERT S
STREET ADDRESS 861 JUPITER PARK DRIVE SUITE A
CITY - ST - ZIP JUPITER, FL 33458

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1000000153212
05/04/04-80117-014 \$5.00

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IN THIS SPACE**

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: _____

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

4/30/04 561-748-3040
Date Daytime Phone #