

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003635

Entity Name: JDON FARMS EAST, LLC

FILED  
Jul 05, 2007  
Secretary of State

## Current Principal Place of Business:

15521 FURLONG CIRCLE  
ODESSA, FL 33556

## New Principal Place of Business:

4750 COVE CIRCLE #1009  
ST. PETERSBURG, FL 33708

## Current Mailing Address:

15521 FURLONG CIRCLE  
ODESSA, FL 33556

## New Mailing Address:

4750 COVE CIRCLE #1009  
ST. PETERSBURG, FL 33708

FEI Number: 55-4044907      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

HECHT, DANIEL A  
15521 FURLONG CIRCLE  
ODESSA, FL 33556      US

## Name and Address of New Registered Agent:

HECHT, DANIEL A  
4750 COVE CIRCLE #1009  
ST. PETERSBURG, FL 33708      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: \_\_\_\_\_

07/05/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM      ( ) Delete  
Name: HECHT, DANIEL A  
Address: 15521 FURLONG CIRCLE  
City-St-Zip: ODESSA, FL 33556

## ADDITIONS/CHANGES:

Title: MGRM      (X) Change      ( ) Addition  
Name: HECHT, DANIEL A  
Address: 4750 COVE CIRCLE #1009  
City-St-Zip: ST. PETERSBURG, FL 33708

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL A HECHT

MGRM

07/05/2007

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