2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000011360

1. Entity Name
JOGMEL, L.L.C.

Principal Place of Business	Mailing Address
AMERITY DEVELOPMENT & INVESTMENT, INC. 2501 EAST COMMERCIAL BLVD., STE. 205 FT LAUDERDALE, FL 33308	AMERITY DEVELOPMENT & INVESTMENT, INC. 2501 EAST COMMERCIAL BLVD., STE. 205 FT LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE

01032008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
14-1838235
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KELLEY, PATRICK G
1401 E. BROWARD BLVD., STE. 206
FT LAUDERDALE, FL 33301

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000834938
02/29/08-80013-014 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	STOCKAMORE, RICK N
STREET ADDRESS	2501 EAST COMMERCIAL BLVD., STE. 205
CITY-ST-ZIP	FT LAUDERDALE, FL 33308
TITLE	MGR
NAME	STOCKAMORE, JOHN H III
STREET ADDRESS	2501 EAST COMMERCIAL BLVD., STE. 205
CITY-ST-ZIP	FT LAUDERDALE, FL 33308
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 exemptions contained in Chapter 119, 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: John H Stockamore 1/3/2008 954-491-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #