## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000020270

Entity Name: JAG FL, L.L.C.

FILED Aug 31, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3907 MACON RD 7900 103RD ST STE A-2 STE 28

COLUMBUS, GA 31907 JACKSONVILLE, FL 32210

**Current Mailing Address: New Mailing Address:** 

3907 MACON RD STE A-2

COLUMBUS, GA 31907

FEI Number: 91-2057710 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DANIELS, KIM DANIELS, KIMBERLY 81 ZORAÝDA AVE 81 ZORAYDA AVE APT-A APT-A

ST AUGUSTINE, FL 32080 ST AUGUSTINE, FL 32080

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: KIMBERLY DANIELS 08/31/2004

> Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS:**

## ADDITIONS/CHANGES:

MGRM () Delete MGRM (X) Change ( ) Addition CUTSFORTH, CLARENCE CHARLES, OWEN L Name: Name:

Address: 4411 HOLLY AVE. Address: 518 BRECK CT City-St-Zip: COLUMBUS, GA 31904 City-St-Zip: BENICIA, CA 94510

I hereby certify that the information supplied with this filing does not qualify for the 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 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: OWEN L CHARLES **MGRM** 08/31/2004