

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020462

Entity Name: JAMAT MOORINGS, LLC

FILED  
Apr 24, 2007  
Secretary of State

**Current Principal Place of Business:**

707 SOUTH WASHINGTON BLVD.  
SARASOTA, FL 34236

**New Principal Place of Business:**

50 CENTRAL AVE  
SUITE 900  
SARASOTA, FL 34236

**Current Mailing Address:**

707 SOUTH WASHINGTON BLVD.  
SARASOTA, FL 34236

**New Mailing Address:**

50 CENTRAL AVE  
SUITE 900  
SARASOTA, FL 34236

FEI Number: 01-0559214

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TOSCH, JOHN E ESQ.  
707 SOUTH WASHINGTON BLVD.  
SARASOTA, FL 34236 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: JAMAT REINSURANCE CO, MPANY, LTD.  
Address: 707 S. WASHINGTON BLVD.  
City-St-Zip: SARASOTA, FL 34236

Title: MGRM ( ) Delete  
Name: BUCHANAN, VERNON G  
Address: 707 S WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

Title: T ( ) Delete  
Name: HITEMAN, STEVE  
Address: 707 S. WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

Title: VPS ( ) Delete  
Name: TOSCH, JOHN  
Address: 707 S. WASHINGTON BLVD  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: HITEMAN, STEVE  
Address: 50 CENTRAL AVE SUITE 900  
City-St-Zip: SARASOTA, FL 34236

Title: VPS (X) Change ( ) Addition  
Name: TOSCH, JOHN  
Address: 50 CENTRAL AVE SUITE 900  
City-St-Zip: SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVE HITEMAN

T

04/24/2007

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