2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 21, 2004
Secretary of State

DOCUMENT# L02000000192

Entity Name: JR PARTNERS, LLC

Current Principal Place of Business:

6522 GUNN HWY
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

6522 GUNN HWY
TAMPA, FL 33625

New Mailing Address:

FEI Number: 04-3635225 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LYNCH, PAUL R
101 EAST KENNEDY BLVD.
SUITE 2800
TAMPA, FL 33602 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/MEMBERS:

Title: MGR ( ) Delete
Name: SUAREZ, JACK D
Address: 6522 GUNN HWY
City-St-Zip: TAMPA, FL 33625

Title: MGR ( ) Delete
Name: CLARK, JAMES R
Address: 6522 GUNN HWY
City-St-Zip: TAMPA, FL 33625

Title: MGR ( ) Delete
Name: ELLRBEE, ARCHIE M
Address: 6522 GUNN HWY
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SUAREZ, JACK D
Address: 6522 GUNN HWY
City-St-Zip: TAMPA, FL 33625

Title: MGRM (X) Change ( ) Addition
Name: CLARK, JAMES R
Address: 6522 GUNN HWY
City-St-Zip: TAMPA, FL 33625

Title: MGRM (X) Change ( ) Addition
Name: ELLRBEE, ARCHIE M
Address: 6522 GUNN HWY
City-St-Zip: TAMPA, FL 33625

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: JACK D SUAREZ MGRM 05/21/2004

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