

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 14, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000009047**

1. Entity Name  
**JUPITER GARDENS GROUP, LLC**



Principal Place of Business  
**375 RIVER EDGE ROAD  
JUPITER, FL 33477 US**

Mailing Address  
**375 RIVER EDGE ROAD  
JUPITER, FL 33477 US**

**DO NOT WRITE IN THIS SPACE**



03012006 No Chg-LLC

CRZE083 (11/05)

4. FEI Number  
**82-0540669**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**8. Name and Address of Current Registered Agent**

**ROGERS, THOMAS J  
375 RIVER EDGE ROAD  
JUPITER, FL 33477**

**DO NOT WRITE  
IN THIS SPACE**

9. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

11/11/05 1467435  
03/23/06-80047-016 50.00

**10. MANAGING MEMBERS/MANAGERS**

TITLE	<b>MGRM</b>
NAME	<b>THOMAS, ROGERS PE PA</b>
STREET ADDRESS	<b>375 RIVER EDGE ROAD</b>
CITY-ST-ZIP	<b>JUPITER, FL 33477</b>
TITLE	<b>MGRM</b>
NAME	<b>MSI BUILDING INC.</b>
STREET ADDRESS	<b>10136 CAOBA STREET</b>
CITY-ST-ZIP	<b>PALM BEACH GARDENS, FL 33410</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:** *Thomas J. Rogers* **THOMAS J. ROGERS**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*03/01/06* **1561745-0605**  
Date Daytime Phone