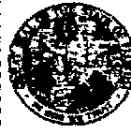


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000027712

1. Entity Name
JPPG, LLC



Principal Place of Business
**448 ST. JOHNS DRIVE
SATELLITE BEACH, FL 32937**

Mailing Address
**448 ST. JOHNS DRIVE
SATELLITE BEACH, FL 32937**



01042006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
14-1855039

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PAVLAKOS, JOHN L
448 ST. JOHNS DRIVE
SATELLITE BEACH, FL 32937**

**DO NOT WRITE
IN THIS SPACE**

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 John Pavlakos

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

(NOTE: Registered Agent signature required when reinstating)

1-4-06
DATE

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

U00000379788
01/10/06-80035-021 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE **P**
NAME **PAULAKOS, JOHN**
STREET ADDRESS **448 ST JOHNS DR**
CITY-ST-ZIP **SATELLITE BEACH, FL 32937**

TITLE **P**
NAME **GAGNON, PAUL**
STREET ADDRESS **515 AVE B**
CITY-ST-ZIP **MELBOURNE BEACH, FL 32951**

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

**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: John Pavlakos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-4-06
Date

321-723-6235
Daytime Phone #