

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006816

Entity Name: JRAS, LLC

FILED
Jan 17, 2006
Secretary of State

Current Principal Place of Business:

11555 CENTRAL PARKWAY
SUITE 501
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

11555 CENTRAL PARKWAY
SUITE 501
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 11-3680881

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWARD A. CAPLAN, ATTORNEY, P.A.
6260 DUPONT STATION CT
SUITE C
JACKSONVILLE, FL 32217 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: MGR () Delete
Name: WARRENFELTZ, JULIE L
Address: 11555 CENTRAL PARKWAY, SUITE 501
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: MGR () Delete
Name: WARRENFELTZ, RODNEY B
Address: 11555 CENTRAL PARKWAY, SUITE 501
City-St-Zip: JACKSONVILLE, FL 32224 US

ADDITIONS/CHANGES:

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

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

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: JULIE L WARRENFELTZ

MGR

01/17/2006

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