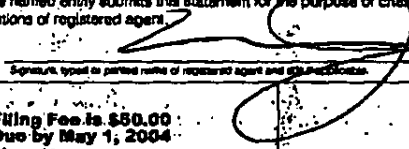
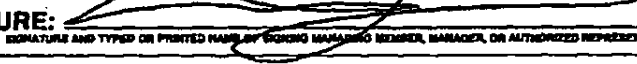


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 19, 2004 8:00 am
Secretary of State

05-03-2004 90130 049 ****50.00

DOCUMENT # L03000012213																											
1. Entity Name JARVIS DEVELOPMENT, LLC																											
Principal Place of Business 11332 MINARET DRIVE TAMPA, FL 33626		Mailing Address 298 SOUTH SAN ANTONIO ROAD MT. VIEW, CA 94301																									
2. Principal Place of Business 2730 Shriver Dr.		3. Mailing Address SAN ANTONIO RD. 298 S. San Antonio Rd.																									
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 300																									
City & State Fort Myers, FL		City & State Mountain View, CA																									
Zip 33901		Zip 94404																									
Country USA		Country USA																									
4. FEI Number 04-3750648		Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent COHN, VANESSA N ESQ. 1110 NORTH FLORIDA AVENUE TAMPA, FL 33802		7. Name and Address of New Registered Agent Name Jarvis, William S. Street Address (P.O. Box Number is Not Acceptable) 2730 Shriver Dr. City Fort Myers FL Zip Code 33901																									
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 		DATE 4/29/04																									
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES																									
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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: 		DATE 4/29/04 650-329-8858																									
SIGNATURE AND TYPED OR PRINTED NAME OF PERSON MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																											