

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020455

Entity Name: JLDK HOLDING, LLC

FILED  
Apr 18, 2005  
Secretary of State

**Current Principal Place of Business:**

5159 TROTT CIRCLE  
UNIT A  
NORTH PORT, FL 342873400 US

**New Principal Place of Business:**

3971 ALBIN AVE.  
STE. 100  
NORTH PORT, FL 342867105 US

**Current Mailing Address:**

3971 ALBIN AVENUE  
NORTH PORT, FL 342867105 US

**New Mailing Address:**

FEI Number: 20-0050678      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LITTLE, LINDA  
3971 ALBIN AVE  
NORTH PORT, FL 34286 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: P ( ) Delete  
Name: LITTLE, J.C.  
Address: 3971 ALBIN AVE.  
City-St-Zip: NORTH PORT, FL 34286

Title: VP ( ) Delete  
Name: LITTLE, LINDA  
Address: 3971 ALBIN AVE  
City-St-Zip: NORTH PORT, FL 34286

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: LITTLE, J.C.  
Address: 3971 ALBIN AVE.  
City-St-Zip: NORTH PORT, FL 34286

Title: MGR (X) Change ( ) Addition  
Name: LITTLE, LINDA  
Address: 3971 ALBIN AVE  
City-St-Zip: NORTH PORT, FL 34286

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: LINDA M. LITTLE

MGR

04/18/2005

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