*2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L03000028513

JNG, LLC



FILED May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

900 S MILITARY TRL WEST PALM BEACH, FL 33413-3910 Mailing Address

WEST PALM BEACH, FL 33413-3910

900 S MILITARY TRL

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04252006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0051232

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KALOGEROPOULOS, LYNNE 6718 LAKE NONA PLACE LAKE WORTH, FL 33463

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	Augustin		
The above named entity submits this statement for the obligations of registered agent.	the purpose of changing its registere	ed office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent an	d title if applicable (NOTE, Registered	d Agent signature required when reinstating)	DATE

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

UUUUUU546451 05/11/06-80117-019 50.nm

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	KALOGEROPOULOS, LYNNE
STREET ADDRESS	6718 LAKE NONA PL
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	MGRM
NAME	ALLEN, LINDA
STREET ADDRESS	8775 AMBACH WAY
CITY - ST - ZIP	HYPOLUXO, FL 33462
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 preciver or trustee employered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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