

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030277

FILED
Apr 07, 2006
Secretary of State

Entity Name: JAAC ENTERPRISES, LLC

Current Principal Place of Business:

4400 140TH AVE N
170
CLEARWATER, FL 33762

New Principal Place of Business:

Current Mailing Address:

4400 140TH AVE N
170
CLEARWATER, FL 33762

New Mailing Address:

FEI Number: 41-2109058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUDOVICI, JOSEPH P ESQ
16709 HUTCHISON RD.
ODESSA, FL 33556 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: LUDOVICI, JOSEPH P D
Address: 16709 HUTCHISON RD
City-St-Zip: ODESSA, FL 33556 US

Title: MGR () Delete
Name: COOPER, KENDALL L D
Address: 3674 WINDING LAKE CIRCLE
City-St-Zip: ORLANDO, FL 32835 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MAN (X) Change () Addition
Name: LUDOVICI, JOSEPH P
Address: 16709 HUTCHISON RD
City-St-Zip: ODESSA, FL 33556 US

Title: VP (X) Change () Addition
Name: CONOVER, GAIL
Address: 5 BAY STREET P.O. 623
City-St-Zip: OZONA, FL 34660 US

Title: TREA () Change (X) Addition
Name: MORTIMER, AMANDA
Address: 900 MAXIMO AVE.
City-St-Zip: CLEARWATER, FL 33759

Title: SEC () Change (X) Addition
Name: ANGELA, UCHRIN
Address: 1787 RANCHWOOD DR. SOUTH
City-St-Zip: DUNEDIN, FL 34698

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: JOSEPH P. LUDOVICI

MAN

04/07/2006

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