

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 24, 2008 8:00 am
Secretary of State

06-24-2008 90044 011 ***538.75

DOCUMENT # L03000030378 1. Entity Name JAMESBURG, L.L.C.																																			
Principal Place of Business XXXXXX HUFFMAN ESQUIRE 350 ROYAL PALM WAY STE. 409 PALM BEACH, FL 33480 XXXXXXXXXXXX		Mailing Address XXXXXX HUFFMAN ESQUIRE 350 ROYAL PALM WAY STE. 409 PALM BEACH, FL 33480 XXXXXXXXXXXX																																	
2. Principal Place of Business - No P.O. Box # c/o Kent Huffman, Esq. Suite, Apt. #, etc. 515 N. Flagler Dr., #801 City & State West Palm Beach, FL Zip Country 33401 USA		3. Mailing Address c/o Kent Huffman, Esq. Suite, Apt. #, etc. 515 N. Flagler Dr., #801 City & State West Palm Beach, FL Zip Country 33401 USA																																	
4. FEI Number 51-0477829		Applied For <input type="checkbox"/> Not Applicable																																	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		01222008 Chg-LLC CR2E083 (12/06)																																	
6. Name and Address of Current Registered Agent HUFFMAN, KENT 350 ROYAL PALM WAY STE. 409 PALM BEACH, FL 33480		7. Name and Address of New Registered Agent Name Kent Huffman, Esq. Street Address (P.O. Box Number is Not Acceptable) 515 North Flagler Drive Suite 801 City West Palm Beach, FL Zip Code 33401																																	
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 Kent Huffman, Esquire January 28, 2008 <small>Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State																																	
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> MGR PALADINO, DAVID C 350 ROYAL PALM WAY STE. 409 PALM BEACH, FL 33480 <input checked="" type="checkbox"/> Delete </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PALADINO, DAVID C 350 ROYAL PALM WAY STE. 409 PALM BEACH, FL 33480 <input checked="" type="checkbox"/> Delete															10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> MGR DAVID PALADINO 515 NORTH FLAGLER DR #801 WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DAVID PALADINO 515 NORTH FLAGLER DR #801 WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition														
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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.																																			
SIGNATURE:		Date: 5/2/08 Daytime Phone #: 386-2751																																	