

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040140

Entity Name: JSM HOLDINGS, LLC

FILED
Apr 27, 2004
Secretary of State

Current Principal Place of Business:

80 EAST 2ND ST.
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

PO BOX 1782
TAVERNIER, FL 33070

New Mailing Address:

FEI Number: 20-0336921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACKEY, MAUREEN M
193 N. COCONUT PALM BLVD.
TAVERNIER, FL 33070 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: MGRM () Delete
Name: LACKEY, MAUREEN
Address: 193 N. COCONUT PALM BLVD.
City-St-Zip: TAVERNIER, FL 33070

Title: MGRM () Delete
Name: SINGLETON, JOHN
Address: 19 LAKESHORE DR.
City-St-Zip: KEY LARGO, FL 33037

Title: MGRM () Delete
Name: SINGLETON, SUSAN
Address: 19 LAKESHORE DR.
City-St-Zip: KEY LARGO, FL 33070

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MAUREEN LACKEY

MS.

04/27/2004

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