


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000041734</b> 1. Entity Name JUPITER BEACH RESORT LLC	
--	---

Principal Place of Business 1001 E ATLANTIC AVE SUITE 202 DELRAY BEACH, FL 33483	Mailing Address 1000 MARKET STREET SUITE 300 PORTSMOUTH, NH 03801
---	--



01232006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 57-1192232	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
---	--

**6. Name and Address of Current Registered Agent**

CRITCHFIELD, RICHARD H 1001 E ATLANTIC AVE DELRAY BEACH, FL 33483
---

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WALSH, MICHAEL P 1000 MARKET STREET PORTSMOUTH, NH 03801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ADE, RICHARD C 1000 MARKET STREET PORTSMOUTH, NH 03801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1101000468897  
03/23/06-00028-015 50.00

**DO NOT WRITE  
IN THIS SPACE**

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 register or trustee authorized to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**  **Richard A. Manager** 1/24/06 603559-  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone # 2600