

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 18, 2006
Secretary of State**

DOCUMENT# L03000049348

Entity Name: JRD HOLDINGS, LLC

Current Principal Place of Business:

110 STATE STREET EAST
SUITE A
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

110 STATE STREET EAST
SUITE A
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 55-0863216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARQUARDT, EMIL C JR.
625 COURT STREET
SUITE 200
CLEARWATER, FL 33756EMIL 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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: FALLA, JUAN F M.D.
Address: 110 STATE STREET E., STE. A
City-St-Zip: OLDSMAR, FL 33677 US

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

Title: MGRM () Delete
Name: FALLA, JOSEPHINE
Address: 110 STATE STREET E., STE. A
City-St-Zip: OLDSMAR, FL 33677 US

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

Title: MGRM () Delete
Name: FOX, DANNY M M.D.
Address: 110 STATE STREET E., STE. A
City-St-Zip: OLDSMAR, FL 33677 US

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

Title: MGRM () Delete
Name: FOX, DAWN
Address: 110 STATE STREET E., STE. A
City-St-Zip: OLDSMAR, FL 33677 US

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

Title: MGRM () Delete
Name: VICENCIO, RONALD M.D.
Address: 110 STATE STREET E., STE. A
City-St-Zip: OLDSMAR, FL 33677 US

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

Title: MGRM () Delete
Name: VICENCIO, LISA
Address: 110 STATE STREET E., STE. A
City-St-Zip: OLDSMAR, FL 33677 US

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 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: DANNY FOX

MM

01/18/2006

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