


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000049506		
1. Entity Name JMA CABLE SPLICING, LLC		
Principal Place of Business 12610 ARBUCKLE COURT NORTH FORT MYERS, FL 33903	Mailing Address 12610 ARBUCKLE COURT NORTH FORT MYERS, FL 33903	

**FILED**  
**Jul 14, 2008 08:00 AM**  
**Secretary of State**



07092008 No Chg-LLC      CR2E083 (12/07)

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4. FEI Number 26-7335518	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

HUGHEY, MARY ANN  
12610 ARBUCKLE CT.  
NORTH FORT MYERS, FL 33903

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008**      In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUGHEY, JEFF 12610 ARBUCKLE COURT NORTH FORT MYERS, FL 33903
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07/14/08-80010-014 138.75

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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:** Jeff Hughey      7/10/2008      239-281-6520

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #