## **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED** May 01, 2006 8:00 am Secretary of State

05-01-2006 90034 008 \*\*\*\*50.00

DOCUMENT # L03000049796

1. Entity Name JAY RUSH PROPERTIES, LLC



Principal Place of Business

Mailing Address

1515 RIVERSIDE AVE., SUITE A 3824 JACKSONVILLE, FL 32204 3240

DO NOT WRITE IN THIS SPACE

1575 RIVERSIDE AVE., SUITE A. 3824 Beffer (

JACKSONVILLE, FL 92204

322/v



03152006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1461347

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RUSHING, ROBERT K

1515 RIVERSIDE AVE., SUITE A 35-24 Reffes C

3220

DO	NOT	WRITE
IN	THIS	<b>SPACE</b>

	*			
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 SANDLER, JÉFFREY M 12387 MANĎÁŘÍN ROAD JACKSONVILLE, FL 32223			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUSHING, ROBERT K 3824 BETTES CIRCLE JACKSONVILLE, FL 32210			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUSHING, JENNIFER C 3824 BETTES CIRCLE JACKSONVILLE, FL 32210	DO NO	T WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SANDLER, E DAYAN 12387 MANDARIN ROAD JACKSONVILLE, FL 32223	IN THIS	S SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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 emprayed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BIGNATURE AND TYPED OR PRINTED NAME OF SMINING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

20/06