

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003591

Entity Name: JAVER ASSOCIATES, LLC

FILED
Jun 08, 2006
Secretary of State

Current Principal Place of Business:

235 LANSING ISLAND DRIVE
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

235 LANSING ISLAND DRIVE
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

FEI Number: 06-1727602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DYER, DAVID W
325 FIFTH AVENUE, SUITE 205
INDIALANTIC, FL 32903 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:

Title: MGRM () Delete
Name: GURGANIOUS, LE ROY
Address: 235 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGR () Delete
Name: PAPPAS, REGINE M
Address: 514 LANTERBACK ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGRM () Delete
Name: PAPPAS, COSTAS
Address: 514 LANTERBACK ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGR () Delete
Name: GURGANIOUS, VALORA S
Address: 235 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: PAPPAS, REGINE M
Address: 514 LANTERBACK ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

Title: MGRM (X) Change () Addition
Name: PAPPAS, COSTAS
Address: 514 LANTERBACK ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

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: VALORA S. GURGANIOUS

MGR

06/08/2006

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