

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011561

Entity Name: JP CUSTOM BLINDS LLC

FILED  
May 30, 2006  
Secretary of State

**Current Principal Place of Business:**

132 SE CARTER AVE  
PORT ST. LUCIE, FL 34983 US

**New Principal Place of Business:**

**Current Mailing Address:**

132 SE CARTER AVE  
PORT ST. LUCIE, FL 34983 US

**New Mailing Address:**

FEI Number: 20-0382010      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:**

POLLETT, JENNIFER R MGR  
132 SE CARTER AVE  
PORT ST. LUCIE, FL 34983 US

**Name and Address of New Registered Agent:**

POLLETT, JAMES T  
132 SE CARTER AVE  
PORT ST. LUCIE, FL 34983 US

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: JAMES T. POLLLETT

05/30/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: POLLETT, JENNIFER R MGR  
Address: 132 SE CARTER AVENUE  
City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: POLLETT, JENNIFER R  
Address: 132 SE CARTER AVENUE  
City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: MGRM ( ) Change (X) Addition  
Name: POLLETT, JAMES T  
Address: 132 SE CARTER AVENUE  
City-St-Zip: PORT ST LUCIE, FL 34983 US

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: JENNIFER POLLETT

MGR

05/30/2006

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