2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 03, 2005 8:00 am Secretary of State 05-03-2005 90013 003 ****55.00

DOCUMENT # L04000015 1. Entity Name JML LLC	0076					
Principal Place of Business 1410 WEST 6TH STREET #7 SILVER CITY, NM 88061	Mailing Address 1410 WEST 6TH STREE #7 SILVER CITY, NM 8806			20054398		
2. Principal Place of Business	3. Mailing Address	10028				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		04202005	Chg-LLC CR2E0	83 (10/03)	
BRADENTON FL	City & State BRADEN	TON PL	4. FEI Numb		Applied For Not Applicable	
Zip Country USA	34282_	Country SA	5. Certificat	e of Status Desired	\$5.00 Additional Fee Required	
6. Name and Address of Current	Registered Agent	Name		d Address of New Registered A		
LEWIS, JERRY M			,	6W15 DERRY M. (P.O. Box Number is Not Acceptable)		
4915 26TH STREET W BRADENTON, FL, FL 34207						
		Cliv 200	<u> </u>		Zig Code	
The above named entity submits this statement for	or the ourpose of changing its	13%	<u> </u>		3420	
the obligations of registered agent.	in the purpose of ontaligning he	regionales emice si reg	giotored again, or a	ıttaa la	E=	
SIGNATURE Signature, typod or printed name of registered agent	and tide if applicable (NOTE	: Registered Apont signature re	equired when reinstating)	DATE	<u>></u>	
Filing Fee is \$50.00 Due by May 1, 2005	·			Make check pi Florida Departma		
9. MANAGING MEMBE		10.	Carofi	ADDITIONS/CHANGES	Change Addition	
NAME LEWIS, JERRY M	☐ Delete	NAME STREET ADDRESS	SAME SAME JOJ W.	45th 5T.	Change	
SIRET ADDRESS 1410 WEST 6TH ST #7 CITY-SI-ZIP SILVER CITY, NM 88061		CLLA-21-515	RADGNIO	N FL. 3420)9	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition	
TULE NAME STREET ADDRESS CITY-ST-ZIP	☐ Daleje	TITLE NAME STITEET ADDRESS CITY-S1-7IP			☐ Change ☐ Addition	
TITLE MAME STREET ADDRESS CITY-ST-Z:P	□ Delete	TITLE RIAME STREET ADDRESS CITY-SI-ZIP	1-21		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Oelele	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Change . □ Addilion	
TITLE HAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE PAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition	
I. I hereby certify that the information supplied with indicated on this report is true and accurate and limited liability company or the repeiver or trusted.	l that my signature shall have t	he same legal effect a	is if made under oat	h; that I am a managing membe	ity that the information r or manager of the	
SIGNATURE:	F SIGRING MANAGING MEMBER, MAN	AGER, OR AUTHORIZED RE	PRESENTATIVE	27 05 (94)) 920 · 282 [