2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Secretary of State DOCUMENT # L04000016382 02-23-2005 90155 036 ****50.00 1. Entity Name JES COMPANY, LLC Principal Place of Business Mailing Address 20000000 690 NORTHSTAR CT BOULDER CO 80304 690 NORTHSTAR CT BOULDER CO 80304 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/04) City & State City & State 4. FEI Number Applied For Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WHITE, JOHN II, ESQ. NASON, YEAGER, GERSON, ET AL 1645 PALM BEACH LAKES BLVD, STE 1200 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33401 City Zip Code 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. (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1 2005 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. ERIC P. SMITH, PENCIPALE Detate TITLE TITLE ☐ Change ■ Addition 690 NORTHSTAK COURT NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOULDER, CO 80304 TITLE JAN E. SMITH, PUNOIPAL DOMES STREET ADDRESS 690 NOETHSTAR COURT CHY-ST-ZIP ☐ Change Addition MAME STREET ADDRESS BOULDER CO 80304 CITY-SI-ZP CITY-ST-ZP Oelete TITLE TITLE ☐ Change ─ · ☐ Addition MALLE NAME STREET AODRESS STREET ADDINESS CITY-ST-ZIP 1 CITY-ST-7IP DILE Detete TITLE ☐ Channa ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 111Y-51-70 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receipts or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

Mar 31, 2005 8:00 am