2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

May 02, 2006 8:00 am Secretary of State DOCUMENT # L04000024315 05-02-2006 90030 026 ****50.00 1. Entity Name JJFB. LLC Principal Place of Business Mailing Address 300 EAST PARK AVENUE 300 EAST PARK AVENUE TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 01252006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 55-0861274 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BATEMAN, FREDERICK L JR. DO NOT WRITE 300 EAST PARK ÁVENUE TALLAHASSEE, FL 32301 IN THIS SPACE 8. The above named epity 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 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 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM2 1 YAL NOSUHOL P.O. BOX 157 STREET ADDRESS CITY-ST-ZIP MADISON, FL 32341 MGR TITLE BATEMAN, FREDERICK L JR. NAME STREET ADDRESS 300 EAST PARK AVENUE CITY-ST-ZIP TALLAHASSEE, FL 32301 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplies 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 received or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRIMED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

4.28.0L

850.222.1020

FILED