

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025329

Entity Name: JAM PROPERTIES, LLC

FILED
Feb 20, 2005
Secretary of State

Current Principal Place of Business:

7040 SEMINOLE PRATT WHITNEY
SUITE 25-26
LOXAHATCHEE, FL 33470

New Principal Place of Business:

7040 SEMINOLE PRATT WHITNEY
STE 25-56
LOXAHATCHEE, FL 33470

Current Mailing Address:

7040 SEMINOLE PRATT WHITNEY
SUITE 25-26
LOXAHATCHEE, FL 33470

New Mailing Address:

7040 SEMINOLE PRATT WHITNEY
STE 25-56
LOXAHATCHEE, FL 33470

FEI Number: 20-0957645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANCE, JAMES G JR
7040 SEMINOLE PRATT WHITNEY
SUITE 25-26
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

LANCE, JAMES G JR
7040 SEMINOLE PRATT WHITNEY
STE 25-56
LOXAHATCHEE, FL 33470 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 G. LANCE, JR.

02/20/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LANCE, JAMES G JR
Address: 7040 SEMINOLE PRATT WHITNEY, SUITE 25-26
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LANCE, JAMES G JR
Address: 7040 SEMINOLE PRATT WHITNEY, STE 25-56
City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES G. LANCE, JR.

MGRM

02/20/2005

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