## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000032267

1. Entity Name

AL . Nº 10

DAWSON & JUMP, L.L.C.

Principal Place of Business

Mailing Address

8642 AUTUMN GREEN DRIVE JACKSONVILLE, FL 32256 8642 AUTUMN GREEN DRIVE JACKSONVILLE, FL 32256

## FILED Apr 14, 2006 08:00 AN Secretary of State



DO NOT WRITE IN THIS SPACE

04092006No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 01-0813126 Not Applied St. Not Applied St. Not Applicable 5.00 Additional

5. Certificate of Status Desired

Fee Required

Daytime Phone #

DAWSON, DEBORAH JUMP 8642 AUTUMN GREEN DRIVE JACKSONVILLE, FL 32256

SIGNATURE AND TYPED OR PRIN

6. Name and Address of Current Registered Agent

## DO NOT WRITE IN THIS SPACE

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.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered		(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006		****	1100000506862 94728706-80021-020 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DAWSON, D. SCOTT 8642 AUTUMN GREEN DR JACKSONVILLE, FL 32256		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
nitle Name Street address City-St-Zip		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE