

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90020 020 \*\*\*\*50.00

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<b>DOCUMENT # L04000033401</b> 1. Entity Name <b>JMCK ENTERPRISES, LLC</b>			
Principal Place of Business <b>70 MAMMOTH GROVE ROAD LAKE WALES, FL 33898</b>		Mailing Address <b>PO BOX 786 LAKE WALES, FL 33859-0786</b>	
2. Principal Place of Business <b>2551 Lakeview Dr</b> Suite, Apt. #, etc.		3. Mailing Address <b>2551 Lakeview Dr.</b> Suite, Apt. #, etc.	
City & State <b>Sebring, FL</b> Zip <b>33870</b>		City & State <b>Sebring, FL 33870</b> Zip <b>33870</b>	
Country <b>USA</b>		Country <b>USA</b>	
4. FEI Number <b>56-2451376</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>FUTCH, JEFFREY E 70 MAMMOTH GROVE ROAD LAKE WALES, FL 33898</b>		7. Name and Address of New Registered Agent Name <b>Futch, Jeffery E</b> Street Address (P.O. Box Number is Not Acceptable) <b>2551 Lakeview Dr.</b> City <b>Sebring</b> <b>FL</b> Zip Code <b>33870</b>	
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  DATE <b>4-22-05</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>		<b>Make check payable to Florida Department of State</b>	
<b>9. MANAGING MEMBERS / MANAGERS</b>		<b>10. ADDITIONS / CHANGES</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FUTCH, JEFFREY E 70 MAMMOTH GROVE ROAD LAKE WALES, FL 33898 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	2551 Lakeview Dr. Sebring, FL 33870 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	martin J. mckenna 2551 Lakeview Dr. Sebring, FL - 33870 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Patrick mckenna 70 mammoth Grove Rd Lake Wales, FL 33859 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: <b>Jeff E Futch</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Date <b>4-22-05</b> <small>Daytime Phone #</small>	