

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038315

FILED
Apr 21, 2005
Secretary of State

Entity Name: JMH PROPERTY HOLDINGS, LLC

Current Principal Place of Business:

3052 SE DARIEN RD.
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

3052 SE DARIEN RD.
PORT ST. LUCIE, FL 34952

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, DEBBIE
1103 SE MCFARLANE AVE
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: YATES, DERON
Address: 3052 SE DARIEN RD.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGR () Delete
Name: PEREZ, DEBBIE
Address: 1103 SE MCFARLANE AVE.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGRM () Delete
Name: BISHOP, MARY ANN
Address: 1357 SE BAY HARBOR ST.
City-St-Zip: PORT ST. LUCIE, FL 34983

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DERON YATES

MR.

04/21/2005

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