



**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 19, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000039169</b>	
1. Entity Name <b>JACARANDA90, LLC</b>	

Principal Place of Business <b>1901 SOUTH TAMiami TRAIL, SUITE A VENICE, FL 34293</b>	Mailing Address <b>1901 SOUTH TAMiami TRAIL, SUITE A VENICE, FL 34293</b>
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**DO NOT WRITE IN THIS SPACE**

	
01082007 No Chg-LLC	CR2E083 (11/05)
4. FEI Number <b>20-1167320</b>	Applied For 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**

**CLOUTIER, JACQUES**  
**1901 SOUTH TAMiami TRAIL, SUITE A**  
**VENICE, FL 34293**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**


**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM CLOUTIER, JACQUES 1901 SOUTH TAMiami TRAIL, SUITE A VENICE, FL 34293</b>
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U00000642256  
03/01/07-80036-008 55.00

**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.**

**SIGNATURE:**  **2-15-07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #