2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 13, 2006 8:00 am Secretary of State

| DOCUMENT # L04000042885 1. Entity Name JACKSON FAMILY PROPERTIES I, L.L.C. | | | | | | | ~ | 02-13-2006 | _ | | |
|---|--------------------------|--|--|---|---|--------------------|-------------------|--------------------|---------------------------|----------------------------|------------------------------|
| Principal Plac | ce of Business | S | Mailing Address | | , , , , , , , , , , , , , , , , , , , | | | | | | |
| 6254 COLAN PLACE | | | 6254 COLAN PLACE | | | | | | - | | |
| SARASOTA, FL 34240 | | | SARASOTA, FL 34240 | | | | 20007756 | | | | |
| | | | | | | | | | | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 02 | 2082006 | Chg-LLC | CR2E | 083 (11/05) | |
| City & State | | | City & State | | | 4. | FEI Number | PLICABLE | | | optied For |
| Zip | ip Country | | Zip Country | | 5. | | of Status Desired | ı 🗆 | \$5.00 Add | ditional | |
| | 6. Name | and Address of Current R | l Registered Agent | | | 7. | Name and | Address of New | Registered | | |
| COURTON IOUNIA | | | | | Name | | | | | | |
| COMPTON, JOHN M 1819 MAIN STREET SUITE 610 SARASOTA, FL 34236 | | | Street Address | | | idress (P.O. | Box Numbe | r is Not Accepta | ble) | | |
| | ., | | | | | | | | | | |
| | | | | | City | | | | Fl | Zip Cod | le |
| | tions of regist | | the purpose of changing its | | | | | n, in the State of | Florida. I am | familiar with, | and accept |
| Filing Fee is \$50.00 Due by May 1, 2006 | | | ru alie ii appicable. (NO1) | E: Hegistered | d Agent signature | e tedmica wyeu i | reinstating) | | DATE | | |
| Fi De | iling Fee i ue by May | s \$50.00 | поле з аррисация. | t: Hegistered | d Agent signature | 'e required when i | reinstating) | | ake check | payable to nent of Stat | e |
| Fi De | iling Fee i ue by May | s \$50.00 | | 10. | d Agent signature | re required when i | renstating) | Flori | ake check | nent of Stat | e |
| 9. | MGR | s \$50.00 / 1, 2006 MANAGING MEMBER | | 10. | : [| re required when i | rens(aling) | Flori | ake check da Departn | nent of Stat | e Addition |
| 9. TITLE NAME | MGR JACKSON | S \$50.00 7 1, 2006 MANAGING MEMBER | RS/MANAGERS | 10. TITLE | E E | e (Baurea when) | renstaing) | Flori | ake check da Departn | nent of Stat | |
| 9. | MGR JACKSON 6254 COL | s \$50.00 / 1, 2006 MANAGING MEMBER | RS/MANAGERS | 10. TITLE NAME STREE | : [| e iequirea when i | renstaing) | Flori | ake check da Departn | nent of Stat | |
| 9. TITLE NAME STREET ADDRESS | MGR JACKSON 6254 COL | S \$50.00 7 1, 2006 MANAGING MEMBER I, THOMAS A AN PLACE | RS/MANAGERS | 10. TITLE NAME STREE | E E ET AODRESS -ST-ZIP | e required when | renstaing) | Flori | ake check da Departn | S Change | |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR JACKSON 6254 COL | S \$50.00 7 1, 2006 MANAGING MEMBER I, THOMAS A AN PLACE | RS/MANAGERS | 10. TITLE NAME STREE | E E ET AODRESS -ST-ZIP | e iequrea when i | renstaing) | Flori | ake check da Departn | nent of Stat | Addition |
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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 fue and accurate and that my signature shall have the same legal effect as if made under eath; 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: Thomas A. Jackson, MGR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/8/06

941-377-9911

Cate Daytime Phone #