

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000046995

Entity Name: J.K. GARNET, LLC

**FILED**  
**Feb 01, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

PO BOX 35-8435  
GAINESVILLE, FL

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 35-8435  
GAINESVILLE, FL

**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:**

BERGMAN, JEFF  
P.O. BOX 358435  
GAINESVILLE, FL 32606 US

**Name and Address of New Registered Agent:**

GARNET, J.K.  
P.O. BOX 358435  
GAINESVILLE, FL 32606 US

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: JEFF BERGMAN

02/01/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BERGMAN, JEFF  
Address: P.O. BOX 358435  
City-St-Zip: GAINESVILLE, FL 32606

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GARNET, J.K.  
Address: P.O. BOX 358435  
City-St-Zip: GAINESVILLE, FL 32606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JEFF BERGMAN

MGR

02/01/2006

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