

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050345

Entity Name: JDE LAKE, LLC

FILED
Jul 03, 2008
Secretary of State

Current Principal Place of Business:

10846 137TH STREET N.
LARGO, FL 33774

New Principal Place of Business:

13800 COUNTY ROAD 450
UMATILLA, FL 32784

Current Mailing Address:

10846 137TH STREET N.
LARGO, FL 33774

New Mailing Address:

13800 COUNTY ROAD 450
UMATILLA, FL 32784

FEI Number: 20-1349479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSWIG, DEBORAH L
10846 137TH STREET NORTH
LARGO, FL 33774 US

Name and Address of New Registered Agent:

JOSWIG, DEBORAH L
13800 COUNTY ROAD 450
UMATILLA, FL 32784 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: DEBORAH JOSWIG

07/03/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: JOSWIG, DEBORAH L
Address: 10846 137TH STREET N.
City-St-Zip: LARGO, FL 33774

Title: VP () Delete
Name: JOSWIG, ERIC V
Address: 10846 137TH STREET N.
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: JOSWIG, DEBORAH L
Address: 13800 COUNTY ROAD
City-St-Zip: UMATILLA, FL 32784

Title: VP (X) Change () Addition
Name: JOSWIG, ERIC V
Address: 13800 COUNTY ROAD 450
City-St-Zip: UMATILLA, FL 32784

I hereby certify that the information supplied with this filing does not qualify 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: DEBORAH JOSWIG

PRES

07/03/2008

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