

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051858

Entity Name: JAMAR, LLC

FILED  
Apr 12, 2009  
Secretary of State

**Current Principal Place of Business:**

12220 TOSCANA WAY, #201  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

3333 SOUTH PENNSYLVANIA AVENUE  
LANSING, MI 48910

**New Mailing Address:**

FEI Number: 20-1399253

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JANKOWSKI, RICHARD L  
12220 TOSCANA WAY, #201  
BONITA SPRINGS, FL 34135 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: JANKOWSKI, RICHARD  
Address: 12220 TOSCANA WAY, #201  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM ( ) Delete  
Name: JANKOWSKI, JANET  
Address: 12220 TOSCANA WAY, #201  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM ( ) Delete  
Name: NOVELLO, MICHAEL  
Address: 3977 SHOALS DRIVE  
City-St-Zip: OKEMOS, MI 48864

Title: MGRM ( ) Delete  
Name: NOVELLO, MARY  
Address: 3977 SHOALS DRIVE  
City-St-Zip: OKEMOS, MI 48864

**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:

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

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: RICHARD JANKOWSKI

MGRM

04/12/2009

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