

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90592 023 ****50.00

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DOCUMENT # L04000052750 1. Entity Name JRD INVESTORS, LLC					
Principal Place of Business 8900 BRIGHTON LN BONITA SPRINGS, FL 34135			Mailing Address 8900 BRIGHTON LN BONITA SPRINGS, FL 34135		
2. Principal Place of Business <i>4559 Pinehurst Greens Court</i> Suite, Apt. #, etc.		3. Mailing Address <i>4559 Pinehurst Greens Court</i> Suite, Apt. #, etc.			
City & State <i>ESTERO, FL</i>		City & State <i>ESTERO, FL</i>		4. FEI Number <i>20-1359097</i>	
Zip 33928		Country		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent DRAGO, JOSEPH R 8900 BRIGHTON LN BONITA SPRINGS, FL 34135			7. Name and Address of New Registered Agent Name <i>DRAGO Joseph R.</i> Street Address (P.O. Box Number is Not Acceptable) <i>4559 PINEHURST GREENS COURT</i> City <i>ESTERO</i> State <i>FL</i> Zip Code <i>33928</i>		
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, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DRAGO, JOSEPH R 8900 BRIGHTON LN BONITA SPRINGS, FL 34135	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DRAGO, Joseph R. 4559 PINEHURST GREENS COURT ESTERO, FL 33928	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>[Signature]</i>			Date <i>3/9/05</i> Daytime Phone # _____		