2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

SIGNATURE:

Feb 11, 2008 8:00 am DOCUMENT # L04000053246 **Secretary of State** 1. Entity Name 02-11-2008 90137 048 ***138.75 JPD HOLDINGS LLC Principal Place of Business Mailing Address 57 CORAL LANE P O BOX 510368 KEY COLONY BEACH FL 33051 P O BOX 510368 KEY COLONY BEACH FL 33051 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 1st MOORE CR2E083 (10/07) City & State 4. EEI Number Applied For 20-1385942 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired MIONROC Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JOHN P. DALTON Street Address (P.O. Box Number is Not Acceptable) 661 57-CORAL LANE **KEY COLONY BEACH FL 33051** Zip Code 8. The above named entity submits this statement for the ose 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 SIGNATURE DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES TITLE MGR ☐ Delete TITLE ☐ Change ☐ Addition NAME DALTON, JOHN P NAME STREET ADDRESS P O BOX 510368 STREET ADDRESS CITY-ST-ZIP KEY COLONY BEACH FL 33051 CITY-ST-Z:P THE ☐ Delete TITLE □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z-P THLE ☐ Delete BHE Change Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change | Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Defete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 11. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, 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. 705-743-0008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

Caytime Phone #