***2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT # L04000070644

JLM INVESTMENT MANAGEMENT, LLC



FILED Jan 09, 2006 08:00 AN **Secretary of State**

Principal Place of Business

Mailing Address

1620 KENNESAW DRIVE CLERMONT, FL 34711

1620 KENNESAW DRIVE CLERMONT, FL 34711



01042006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable	
	 \$5.00 Additional	
Certificate of Status Desired	Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

COHEN, DAVID 5728 MAJOR BLVD. **SUITE 550** ORLANDO, FL 32818

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the purpose of cha tions of registered agent.	ingling its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
F	iling Fee is \$50.00 ue by May 1, 2006		U00000379590 01/10/06-80030-009 50. 00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MATTINGLY, JAMES L JR. 1620 KENNESAW DRIVE ORLANDO, FL 34711		:
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE		ר ואו	THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

PPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE