

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000010390

Entity Name: JADEN LANE, LLC

**FILED**  
**Jan 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

800 SIMONTON STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

800 SIMONTON STREET  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 56-2498169

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURCHFIELD, GARY  
800 SIMONTON STREET  
KEY WEST, FL 33040 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  
Name: BURCHFIELD, GARY  
Address: 800 SIMONTON STREET  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM  
Name: FELDMAN, DONNA  
Address: 1418 ANGELA STREET  
City-St-Zip: KEY WEST, FL 33040

I hereby 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: GARY BURCHFIELD

MGRM

01/12/2011

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