## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jul 12, 2006 8:00 am Secretary of State

					Secretar	, OI 20	mu	
DOCUMENT # L05000018105  1. Entity Name JARCK, LLC					07-12-2006 90085 048 ****50.00			
Principal Place of Business  6801 N.W. NINTH BLVD, STE 3  GAINESVILLE, FL 32605  Mailing Address  6801 N.W. NINTH BLVD, STE 3  GAINESVILLE, FL 32605					~v040	402		
Principal Place of Business     3. Mailing Address								
Suite, Apt.	30 NW 9 (117 P)	6730000 Suite, Apt. #, etc.	llin plac	10	_		1881 117 1884	
City & State		_ City & State		0707200		12E083 (11/05)	pplied For	
<u> </u>	vesville, the	Garanesville	,FL	20	<u>- 2411005</u>	No	ot Applicable	
326	os Country A	32405	Country	5. Certific	ate of Status Desired	\$5.00 Add Fee Required		
	6. Name and Address of Current	Registered Agent	Mamo	7. Name a	and Address of New Registe	red Agent		
BUTTS, ROBERT P ESQ FISHER, BUTTS, SECHREST & WARNER, PA 5203 SW 91ST TERR, STE D GAINESVILLE, FL 32608				Name				
				Street Address (P.O. Box Number is Not Acceptable)				
						17:0:1		
			City			FL Zip Code		
	named entity submits this statement for ions of registered agent.	r the purpose of changing its re	egistered office or	registered agent, or	both, in the State of Florida.	am familiar with,	and accept	
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NDTE: F	Registered Agent signati	ure required when reinstating	) 0	ATE		
Filing Fee is \$50.00 Due by September 6, 2006					Make check payable to Florida Department of State			
Duê D							e	
9.		RS/MANAGERS	10.		Florida Department ADDITIONS/CHAN	artment of State	e 	
	by September 6, 2006	RS/MANAGERS	10. TITLE NAME STREET ADDRESS CITY-S1-ZIP	147 BAN 100	ADDITIONS/CHAN	IGES Change	Addition	
9. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	MANAGING MEMBE MGRM ALDERMAN, JENNIFER L 6801 N.W. NINTH BLVD, STE 3 GAINESVILLE, FL 32605 MGRM		TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE	HIGE NO	ADDITIONS/CHAN	IGES Change		
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBE MGRM ALDERMAN, JENNIFER L 6801 N.W. NINTH BLVD, STE 3 GAINESVILLE, FL 32605 MGRM ROSS, KELLI C 6801 N.W. NINTH BLVD, STE 3	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP	HIGE NO BOLDESVI ROSS, KEL GIZONU	ADDITIONS/CHAN  ADDITIONS/CHAN	IGES  Change  Change	☐ Addition	
9.  TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBE MGRM ALDERMAN, JENNIFER L 6801 N.W. NINTH BLVD, STE 3 GAINESVILLE, FL 32605 MGRM ROSS, KELLI C	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	Alderma 6730 Nu Moem Ross Kel	ADDITIONS/CHAN ADDITI	IGES  Change  Change	☐ Addition	
9.  TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	MANAGING MEMBE MGRM ALDERMAN, JENNIFER L 6801 N.W. NINTH BLVD, STE 3 GAINESVILLE, FL 32605 MGRM ROSS, KELLI C 6801 N.W. NINTH BLVD, STE 3	☐ Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	HIGE NO BOLDESVI ROSS, KEL GIZONU	ADDITIONS/CHAN  ADDITIONS/CHAN	IGES  Change  Change	Addition	
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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: JUNE DAIL JERNIEL L. ALGUMAN 7/7/06 352 331-323'
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Dale Daytome Prome #