
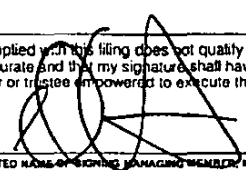


FILED
Feb 21, 2006 8:00 am
Secretary of State

01-24-2006 90046 001 ***110.00

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000056426					
1. Entity Name JESSAMINE LAKE ESTATES, LLC					
Principal Place of Business 24 SOUTH ORANGE AVENUE ORLANDO, FL 32801			Mailing Address 24 SOUTH ORANGE AVENUE ORLANDO, FL 32801		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number	
				01172006 Chg-LLC CR2E083 (11/05)	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ESTES, THEODORE D ESQ. DIVINE & ESTES, P.A. 24 SOUTH ORANGE AVENUE ORLANDO, FL 32802-3629				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
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 re-registering) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ESTES, THEODORE D ESQ. 24 SOUTH ORANGE AVENUE ORLANDO, FL 32801 <input type="checkbox"/> Delete		10. ADDITIONS/CHANGES		
			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: 			1-19-06 407/426-9500		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		



ATTACHMENT
30000784

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2006

JESSAMINE LAKE ESTATES, LLC
24 SOUTH ORANGE AVENUE
ORLANDO, FL 32801

Subject: JESSAMINE LAKE ESTATES, LLC

Reference Number: L05000056426

Please be advised, we have received your annual report/uniform business report and check(s) totaling \$110.00 of which \$55.00 has been designated to file this report. However, the enclosed annual report/uniform business report **has not been filed** and a copy is being returned to you for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE
ANNUAL REPORTS SECTION