

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Mar 20, 2006
Secretary of State**

DOCUMENT# L05000067673

Entity Name: JEANMARTIN REALTY, LLC

Current Principal Place of Business:

2970 ST. JOHNS AVENUE
7G
JACKSONVILLE, FL 32205 US

New Principal Place of Business:

Current Mailing Address:

2970 ST. JOHNS AVENUE
7G
JACKSONVILLE, FL 32205 US

New Mailing Address:

FEI Number: 20-4074577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HENDERSON, JEAN E MRS.
2970 ST. JOHNS AVENUE
7G
JACKSONVILLE, FL 32205 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 () Delete
Name: HENDERSON, JEAN E MRS.
Address: 2970 ST. JOHNS AVENUE, #7G
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: MGRM () Delete
Name: ELLIS, MARTIN E MR.
Address: 14510 FENNEY COURT
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: MGRM () Delete
Name: HENDERSON, RANDAL H DR.
Address: 2970 ST. JOHNS AVENUE, #7G
City-St-Zip: JACKSONVILLE, FL 32205 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: JEAN E. HENDERSON

PRES

03/20/2006

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