

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90043 035 \*\*\*\*50.00

**DOCUMENT # L05000070231**



1. Entity Name  
**JPM HOLDINGS, LLC**

Principal Place of Business  
**108 OCEAN COVE DRIVE  
 JUPITER, FL 33477**

Mailing Address  
**108 OCEAN COVE DRIVE  
 JUPITER, FL 33477**

**14403 Cypress Island Cir. 14403 Cypress Island Cir**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

**Palm Beach Gardens, FL**

Suite, Apt. #, etc.

**Palm Beach Gardens, FL**

City & State

City & State

04122006 Chg-LLC CR2E083 (11/05)

4. FEI Number

**203193169**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$5.00** Additional Fee Required

Zip **33410**

Country **USA**

Zip **33410**

Country **USA**

**6. Name and Address of Current Registered Agent**

**KLEIN, STUART B  
 STUART B. KLEIN, P.A.  
 2801 PGA BOULEVARD, SUITE 200  
 PALM BEACH GARDENS, FL 33410**

**7. Name and Address of New Registered Agent**

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

*James P. Messersmith*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**4/12/06**

DATE

**Filing Fee is \$50.00  
 Due by May 1, 2006**

**Make check payable to  
 Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  Delete  
 NAME **MGRM MESSERSMITH, JAMES P**  
 STREET ADDRESS **108 OCEAN COVE DRIVE**  
 CITY-ST-ZIP **JUPITER, FL 33477**

TITLE  Delete  
 NAME **MGRM PORTAGE PROPERTIES, LLC**  
 STREET ADDRESS **1959 PORTAGE LANDING SOUTH**  
 CITY-ST-ZIP **NORTH PALM BEACH, FL 33408**

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

**10. ADDITIONS/CHANGES**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS **14403 Cypress Island Cir**  
 CITY-ST-ZIP **Palm Beach Gardens, FL 33410**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
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 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:**

*James P. Messersmith*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**4/12/06**

Date

**561-799-2076**

Daytime Phone #