

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071798

FILED
Apr 27, 2007
Secretary of State

Entity Name: JACT 49, LLC

Current Principal Place of Business:

16647 78TH ROAD NORTH
LOXAHATCHEE, FL 334703088

New Principal Place of Business:

Current Mailing Address:

16647 78TH ROAD NORTH
LOXAHATCHEE, FL 334703088

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMSER, KAREN
16647 78TH ROAD NORTH
LOXAHATCHEE, FL 334703088 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: MGR () Delete
Name: KRAMSER, ADAM
Address: 16647 78TH ROAD NORTH
City-St-Zip: LOXAHATCHEE, FL 334703088

Title: MGR () Delete
Name: KRAMSER, KAREN
Address: 16647 78TH ROAD NORTH
City-St-Zip: LOXAHATCHEE, FL 334703088

Title: MGR () Delete
Name: EHRLUND, JOHN
Address: 3866 CABBAGE PALM WAY
City-St-Zip: LOXAHATCHEE, FL 334702402

Title: MGR () Delete
Name: EHRLUND, GEORGIA
Address: 3866 CABBAGE PALM WAY
City-St-Zip: LOXAHATCHEE, FL 334702402

Title: MGR () Delete
Name: KRAMSER, GEORGE
Address: 8821 SOUTH LAKE DASHA DRIVE
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: KRAMSER, CYNTHIA
Address: 8821 SOUTH LAKE DASHA DRIVE
City-St-Zip: PLANTATION, FL 33324

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:

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

Title: () Change () Addition
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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 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: KAREN L. KRAMSER

RA

04/27/2007

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