

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079501

Entity Name: JMC PROPERTIES LLC

FILED  
Jul 05, 2006  
Secretary of State

**Current Principal Place of Business:**

1213 WINDWARD DR.  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

1213 WINDWARD DR.  
APOPKA, FL 32703

**New Mailing Address:**

FEI Number: 37-3725738      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

COX, JAMIE B  
9905 DEAN COVE LANE  
ORLANDO, FL 32825    US

**Name and Address of New Registered Agent:**

COX, JAMIE B  
1213 WINDWARD DRIVE  
APOPKA, FL 32703    US

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: JAMIE COX

07/05/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:            MGR            ( ) Delete  
Name:            COX, JAMIE B  
Address:        9905 DEAN COVE LANE  
City-St-Zip:    ORLANDO, FL 32825 US

Title:            MGR            ( ) Delete  
Name:            COX, MIRANDA A  
Address:        9905 DEAN COVE LANE  
City-St-Zip:    ORLANDO, FL 32825 US

**ADDITIONS/CHANGES:**

Title:            MGR            (X) Change ( ) Addition  
Name:            COX, JAMIE B  
Address:        1213 WINDWARD DRIVE  
City-St-Zip:    APOPKA, FL 32703 US

Title:            MGR            (X) Change ( ) Addition  
Name:            COX, MIRANDA A  
Address:        1213 WINDWARD DRIVE  
City-St-Zip:    APOPKA, FL 32703 US

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: JAMIE COX

MGR

07/05/2006

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