2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

NTEO NAME OF SIGNING MANAGING

## Secretary of State DOCUMENT # L05000094846 02-17-2006 90019 041 \*\*\*\*50.00 JAC INVESTMENTS LLC\_ Principal Place of Business Mailing Address 12794 WEST FOREST HILL BOULEVARD 12794 WEST FOREST HILL BOULEVARD STE 29 WELLINGTON FL 33414 WELLINGTON FL 33414 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State Applied For Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GRIFFIN, ADRIENNE Street Address (P.O. Box Number is Not Acceptable) 12794 WEST FOREST HILL BLVD STE 29: WELLINGTON FL 33414 City 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 Springer, typing or presed name of repairs an appear and size it applicables (NOTE: Registered Agent signature required when reinstativity) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TIPLE MGRM Delete TITLE ☐ Channe ☐ Addition NAME GRIFFIN, ADRIENNE MAME STREET ADDRESS STREET ADDRESS 12794 WEST FOREST HILL BLVD #29 CITY-ST-Z:P WELLINGTON FL 33414 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MILE ☐ Delete TOLE ☐ Change ☐ Addition HALES NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Detete nne ☐ Change ☐ Addition MALIF NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Detecte me Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete DIE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 ooth; 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. ADRIENNE CRIFFIN

FILED

Mar 06, 2006 8:00 am



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 20, 2006

JAC INVESTMENTS LLC 12794 WEST FOREST HILL BOULEVARD **WELLINGTON, FL 33414 US** 

Subject: JAC INVESTMENTS LLC

Reference Number:

£05000094846

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned 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.

/rm

ANNUAL REPORTS SECTION

PLS SEE ATTACHED WITH EINT

P.O. BOX 6478 - Tallahassee, Florida 32314 FARE