2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105243

Entity Name: JASPER ESTATES, LLC

11 COTTAGE GATE COURT

PALM COAST, FL 32137

Address:

City-St-Zip:

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 60 SURFVIEW DR., #121 PALM COAST, FL 32137 **Current Mailing Address: New Mailing Address:** 60 SURFVIEW DR., #121 PALM COAST, FL 32137 FEI Number: 04-3826835 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GARCIA, JOSEFINA C 60 SURÉVIEW DR., #121 PALM COAST, FL 32137 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete LARA, VIOLETA P Name: Name: 5 VALENCIA COURT Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ARNOLD, RANDALL R Name: Name: Address: 12 ST. CHARLES PLACE Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GARCIA, JOSEFINA C Name: Name: Address: 60 SURFVIEW DRIVE, #121 Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PANILAG, MARIA L Name: Address: 11 COTTAGE GATE COURT Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PANILAG, SAMUEL R Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JOSEFINA C. GARCIA MGRM 04/21/2009