

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110406

**FILED**  
**Apr 10, 2006**  
**Secretary of State**

**Entity Name:** SEVELL JONES HOLDINGS, LLC

**Current Principal Place of Business:**

2295 N.W. CORPORATE BLVD.  
BOCA RATON, FL 33431

**New Principal Place of Business:**

2295 N.W. CORPORATE BLVD NW  
SUITE 131  
BOCA RATON, FL 33431

**Current Mailing Address:**

2295 N.W. CORPORATE BLVD.  
BOCA RATON, FL 33431

**New Mailing Address:**

2295 N.W. CORPORATE BLVD NW  
SUITE 131  
BOCA RATON, FL 33431

**FEI Number:** 20-3797509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEVELL, ARNOLD  
2295 N.W. CORPORATE BLVD.  
BOCA RATON, FL 33431 US

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

SEVELL, ARNOLD  
2295 N.W. CORPORATE BLVD. NW  
SUITE 131  
BOCA RATON, FL 33431 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:**

04/10/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR. ( ) Change (X) Addition  
Name: SEVELL, ARNOLD  
Address: 2295 CORPORATE BLVD NW SUITE 131  
City-St-Zip: BOCA RATON, FL 33431

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:** ARNOLD SEVELL

MR.

04/10/2006

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