

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000004723

FILED
Feb 19, 2007
Secretary of State

Entity Name: JCP PARTNERS, LLC

Current Principal Place of Business:

385 BELL BRANCH LANE
JACKSONVILLE, FL 32259 US

New Principal Place of Business:

11481 OLD ST AUGUSTINE RD
STE # 104
JACKSONVILLE, FL 32258 US

Current Mailing Address:

385 BELL BRANCH LANE
JACKSONVILLE, FL 32259 US

New Mailing Address:

11481 OLD ST AUGUSTINE RD
STE # 104
JACKSONVILLE, FL 32258 US

FEI Number: 83-0445391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CENTRELLA, JASON S
385 BELL BRANCH LANE
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

CENTRELLA, JASON S
11481 OLD ST AUGUSTINE RD
STE # 104
JACKSONVILLE, FL 32258 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: JASON S CENTRELLA

02/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CENTRELLA, JASON S
Address: 385 BELL BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGRM () Delete
Name: RADWANSKI, THOMAS M
Address: 805 WATERCRESS CT
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGR () Delete
Name: CENTRELLA, JOANNE M
Address: 385 BELL BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGR () Delete
Name: RADWANSKI, CHRISTINE B
Address: 805 WATERCRESS CT
City-St-Zip: JACKSONVILLE, FL 32259 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: RADWANSKI, THOMAS M
Address: 805 WATERCRESS CT
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: () Change () Addition
Name:
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 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: JASON S CENTRELLA

MGRM

02/19/2007

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