

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000013009

Entity Name: JARA & WEIDNER, LLC.

FILED
Jan 29, 2007
Secretary of State

Current Principal Place of Business:

14887 CRESCENT COVE DRIVE
FT. MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

14887 CRESCENT COVE DRIVE
FT. MYERS, FL 33908

New Mailing Address:

FEI Number: 20-4254129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSSMAN, HOWARD F JR
2430 SHADOWLAWN DRIVE
SUITE 7
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

JARA, KRISTINA M MGRM
14887 CRESCENT COVE DRIVE
FORT MYERS, FL 33908 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: KRISTINA JARA

01/29/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JARA, JOSE
Address: 14887 CRESCENT COVE DRIVE
City-St-Zip: FT. MYERS, FL 33908

Title: MGR () Delete
Name: WEIDNER, KRISTINA
Address: 14887 CRESCENT COVE DRIVE
City-St-Zip: FT. MYERS, FL 33908

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JARA, JOSE
Address: 14887 CRESCENT COVE DRIVE
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM (X) Change () Addition
Name: WEIDNER, KRISTINA
Address: 14887 CRESCENT COVE DRIVE
City-St-Zip: FT. MYERS, FL 33908

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: JOSE JARA

MGRM

01/29/2007

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