

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015602

Entity Name: JAL LLC

FILED  
Mar 29, 2009  
Secretary of State

**Current Principal Place of Business:**

1024 DIAMOND LAKE CIRCLE  
NAPLES, FL 34114

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10121  
EUGENE, OR 97440

**New Mailing Address:**

FEI Number: 20-4354572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NOVATT, JEFF M ESQ.  
C/O CHEFFY, PASSIDOMO, ET AL  
821 FIFTH AVE. SOUTH, SUITE 201  
NAPLES, FL 34102 US

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

NOVATT, JEFF M ESQ.  
821 FIFTH AVENUE SOUTH  
SUITE 201  
NAPLES, FL 34102 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: JEFF M. NOVATT, ESQ.

03/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: VAN HORN, LESTER D  
Address: P.O. BOX 10121  
City-St-Zip: EUGENE, OR 97440

**ADDITIONS/CHANGES:**

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

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.

SIGNATURE: LESTER D. VAN HORN

MGR

03/29/2009

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