

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031036

Entity Name: JAS CONSTRUCTION, LLC

FILED
Sep 05, 2007
Secretary of State

Current Principal Place of Business:

6360 JONES CREEK ROAD
KEYSTONE HEIGHTS, FL 32656

New Principal Place of Business:

169 NW GWEN LAKE AVE
LAKE CITY, FL 32055

Current Mailing Address:

6360 JONES CREEK ROAD
KEYSTONE HEIGHTS, FL 32656

New Mailing Address:

169 NW GWEN LAKE AVE
LAKE CITY, FL 32055

FEI Number: 20-4569797 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CRAIGIE, WILLIAM CA
6360 JONES CREEK ROAD
KEYSTONE HEIGHTS, FL 32656 US

Name and Address of New Registered Agent:

CRAIGIE, WILLIAM CA
169 NW GWEN LAKE AVE
LAKE CITY, FL 32055 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:

09/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CRAIGIE, WILLIAM CA
Address: 6360 JONES CREEK ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: MGRM () Delete
Name: ESQUIVEZ, SALVADOR
Address: 6360 JONES CREEK ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: MGRM () Delete
Name: LAWRENCE, LARRY J
Address: 6360 JONES CREEK ROAD
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRAIGIE, WILLIAM CA
Address: 169 NW GWEN LAKE AVE
City-St-Zip: LAKE CITY, FL 32055

Title: MGRM (X) Change () Addition
Name: ESQUIVEZ, SALVADOR
Address: 169 NW GWEN LAKE AVE
City-St-Zip: LAKE CITY, FL 32055

Title: MGRM (X) Change () Addition
Name: LAWRENCE, LARRY J
Address: 169 NW GWEN LAKE AVE
City-St-Zip: LAKE CITY, FL 32055

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: WILLIAM C A CRAIGIE

MGRN

09/05/2007

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