

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-07-2007 90113 034 ****50.00

DOCUMENT # L06000034000 1. Entity Name JJCM HOLDINGS, LLC					
Principal Place of Business 456 NW 35TH STREET BOCA RATON, FL 33431			Mailing Address 456 NW 35TH STREET BOCA RATON, FL 33431		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-4613736	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MCCOLGAN, CATHY A 456 NW 35TH STREET BOCA RATON, FL 33431				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when renouncing) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOLGAN, JEROME K 456 NW 35TH STREET BOCA RATON, FL 33431	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOLGAN, CATHY A 456 NW 35TH STREET BOCA RATON, FL 33431	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOLGAN, MATTHEW K 456 NW 35TH STREET BOCA RATON, FL 33431	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOLGAN, JAMES P 456 NW 35TH STREET BOCA RATON, FL 33431	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOLGAN, JAMES P 456 NW 35TH STREET BOCA RATON, FL 33431	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOLGAN, JAMES P 456 NW 35TH STREET BOCA RATON, FL 33431	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOLGAN, JAMES P 456 NW 35TH STREET BOCA RATON, FL 33431	☐ Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.					
SIGNATURE: <u>Cathy Amp Colgan</u> 2/5/07 561-391-6135 SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
<u>Cathy Amp Colgan</u> 2/26/07 SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

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