2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# L06000037319

Entity Name: JNP ENTERPRISES, LLC

Current Principal Place of Business:

2924 HUNTER FISH CAMP RD
MARIANNA, FL 32446 US

New Principal Place of Business:

Current Mailing Address:

2924 HUNTER FISH CAMP RD
MARIANNA, FL 32446 US

New Mailing Address:

FEI Number: 20-4668734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PELT, NICHOLAS
2924 HUNTER FISH CAMP RD
MARIANNA, FL 32446 US

Name and Address of New Registered Agent:

PELT, NICHOLAS A
2924 HUNTER FISH CAMP RD
MARIANNA, FL 32446 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: NICHOLAS A. PELT 04/29/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PELT, NICHOLAS
Address: 2924 HUNTER FISH CAMP RD
City-St-Zip: MARIANNA, FL 32446 US

Title: MGRM ( ) Delete
Name: PELT, JUSTIN
Address: 2322 RAINTREE LANE
City-St-Zip: MARIANNA, FL 32448 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PELT, NICHOLAS A
Address: 2924 HUNTER FISH CAMP RD
City-St-Zip: MARIANNA, FL 32446 US

Title: MGRM (X) Change ( ) Addition
Name: PELT, JUSTIN A
Address: 2322 RAINTREE LANE
City-St-Zip: MARIANNA, FL 32448 US

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: NICHOLAS A. PELT MGRM 04/29/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date