

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000063786

Entity Name: JOLLY GREEN, LLC

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1615 FORUM PL., STE 3B
WEST PALM BEACH, FL 33401

New Principal Place of Business:

1615 FORUM PLACE
SUITE 3B
WEST PALM BEACH, FL 33401

Current Mailing Address:

1615 FORUM PL., STE 3B
WEST PALM BEACH, FL 33401

New Mailing Address:

1615 FORUM PLACE
SUITE 3B
WEST PALM BEACH, FL 33401

FEI Number: 20-5594577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIGGIO, JEFFREY M
1615 FORUM PL., STE 3B
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

LIGGIO, JEFFREY M
1615 FORUM PLACE
SUITE 3B
WEST PALM BEACH, FL 33401 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: JEFFREY M. LIGGIO

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LIGGIO, JEFFREY M
Address: 1615 FORUM PL., STE 3B
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: LIGGIO, SUSAN
Address: 1615 FORUM PL., STE 3B
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

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

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: JEFFREY M. LIGGIO

MGRM

04/28/2009

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