2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081664

Entity Name: JLN INVESTMENTS, LLC

Apr 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

19102 FERN MEADOW LOOP LUTZ, FL 33558

Current Mailing Address: New Mailing Address:

19102 FERN MEADOW LOOP LUTZ, FL 33558 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

JOHNSON, MELISSA 19102 FERN MEADOW LOOP LUTZ, FL 33558

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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: () Change () Addition () Delete

JOHNSON, MATT T Name: Name: 19102 FERN MEADOW LOOP Address: Address: City-St-Zip: LUTZ. FL 33558 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

JOHNSON, MELISSA A Name: Name: Address: 19102 FERN MEADOW LOOP Address: City-St-Zip: LUTZ, FL 33558 US City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition

NEWCOM, GARY L NEWCOM, GARY L Name: Name:

11216 POCKET BROOK DRIVE Address: 19102 FERN MEADOW LOOP Address:

City-St-Zip: LUTZ. FL 33558 US City-St-Zip: TAMPA, FL 33635 US

Title: MGR () Delete Title: MGR (X) Change () Addition NEWCOM, SONDRA L Name: NEWCOM, SONDRA L Name:

Address: 19102 FERN MEADOW LOOP Address: 11216 POCKET BROOK DRIVE

City-St-Zip: LUTZ, FL 33558 US City-St-Zip: TAMPA, FL 33635 US

Title: MGR () Delete Title: (X) Change () Addition NEWCOM, CHRISTOPHER T NEWCOM, CHRISTOPHER T Name: Name: 19102 FERN MEADOW LOOP 19108 FERN MEADOW LOOP Address: Address:

City-St-Zip: LUTZ, FL 33558 US City-St-Zip: LUTZ, FL 33558 US

Title: () Delete Title: (X) Change () Addition

LAMPSHIRE, LESLIE NEWCOM, LORI E Name: Name: Address: 19102 FERN MEADOW LOOP Address: 515 YORK DALE DRIVE LUTZ, FL 33558 US City-St-Zip: RUSKIN, FL 33570 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MELISSA JOHNSON 04/18/2007