

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000082774

FILED
Jul 03, 2007
Secretary of State

Entity Name: JUMPIN' GOOD TIME, LLC

Current Principal Place of Business:

6562 BAMBOO AVE.
COCOA, FL 32927

New Principal Place of Business:

4995 N. COCOA BLVD. UNIT 120
COCOA, FL 32927

Current Mailing Address:

6562 BAMBOO AVE.
COCOA, FL 32927

New Mailing Address:

P.O. BOX 189
SHARPES, FL 32959

FEI Number: 42-5250451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRABTREE, CONNIE S
6562 BAMBOO AVE.
COCOA, FL 32927 US

Name and Address of New Registered Agent:

SPEECE, DEBORAH G
6455 ABERFOYLE AVENUE
COCOA, FL 32927 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: DEBORAH G. SPEECE

07/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CRABTREE, WALTER L
Address: 6562 BAMBOO AVE.
City-St-Zip: COCOA, FL 32927

Title: MGRM () Delete
Name: CRABTREE, CONNIE S
Address: 6562 BAMBOO AVE.
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SPEECE, DEBORAH G
Address: 6455 ABERFOYLE AVENUE
City-St-Zip: COCOA, FL 32927

Title: MGRM (X) Change () Addition
Name: SPEECE, ROBERT F
Address: 6455 ABERFOYLE AVENUE
City-St-Zip: COCOA, FL 32927

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: DEBORAH G. SPEECE

MGRM

07/03/2007

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