

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085274

Entity Name: JAPER INVESTMENTS, LLC

FILED  
Mar 16, 2007  
Secretary of State

**Current Principal Place of Business:**

6988 ORANGE AVENUE  
INDIAN LAKES ESTATES, FL 33855

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 7852  
INDIAN LAKES ESTATES, FL 33855

**New Mailing Address:**

FEI Number: 51-0598141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PERRY, JAMES F  
6988 ORANGE AVENUE  
INDIAN LAKES ESTATES, FL 33855 US

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

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:**

Title: MGRM ( ) Delete  
Name: PERRY, JAMES F  
Address: 6988 ORANGE AVENUE  
City-St-Zip: INDIAN LAKES ESTATES, FL 33855

Title: MGRM ( ) Delete  
Name: PERRY, CAROLYN D  
Address: 6988 ORANGE AVENUE  
City-St-Zip: INDIAN LAKES ESTATES, FL 33855

**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 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: JAMES F PERRY

MGRM

03/16/2007

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