

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

04-16-2007 90338 028 ****50.00

DOCUMENT # L06000087904 1. Entity Name JKSH PROPERTIES LLC			
Principal Place of Business 232 S. DILLARD ST SUITE 202 WINTER GARDEN, FL 34787		Mailing Address PO BOX 770609 WINTER GARDEN, FL 34777	
2. Principal Place of Business - No P.O. Box # 132 W. Plant St Suite, Apt. #, etc. Suite 200 City & State Winter Garden FL Zip 34787		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country U.S.	
4. FEI Number 20-5501515		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		04112007 Chg-LLC CR2E083 (12/06)	
6. Name and Address of Current Registered Agent MAY, JACQUELINE M 232 S. DILLARD ST SUITE 202 WINTER GARDEN, FL 34787		7. Name and Address of New Registered Agent Name Street Address (P.O. Box) (e) 132 W. Plant St. Suite 200 City Winter Garden FL Zip Code 34787	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Signature by</i></u> 4-11-07 Signature, typed or printed name of registered agent and power of attorney (NOTE: Registered Agent signature required when renewing)			
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR JUNE, ROHLAND A II PO BOX 770609 WINTER GARDEN, FL 34777	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR KAMINSKI, CHRISTOPHER PO BOX 770609 WINTER GARDEN, FL 34777	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SEDOFF, JEFFREY A PO BOX 770609 WINTER GARDEN, FL 34777	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOLSTON, ROBERT W PO BOX 770609 WINTER GARDEN, FL 34777	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.			
SIGNATURE: <u><i>Signature</i></u> ROHLAND A. JUNE		Date: 4-11-07 Daytime Phone # 409-905-8890	