


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**


**FILED**  
**Apr 21, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L06000096317**  
 1. Entity Name  
 JGP INVESTMENTS, LLC



Principal Place of Business 4644 W. GANDY BLVD. SUITE 4-411 TAMPA, FL 33611	Mailing Address 4644 W. GANDY BLVD. SUITE 4-411 TAMPA, FL 33611
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**DO NOT WRITE IN THIS SPACE**



02062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5645052	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

POWELL, JULIE G  
 3223 W. VILLA ROSA STREET  
 TAMPA, FL 33611

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

1000000908150  
 05/06/08-80018-021 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM POWELL, JULIE G 4644 W. GANDY BLVD., STE 4-411 TAMPA, FL 33611
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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 608, Florida Statutes

SIGNATURE Julie G Powell Date 2/7/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE