

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081787

FILED
Mar 26, 2008
Secretary of State

Entity Name: JARGRASS, L.L.C.

Current Principal Place of Business:

1000 S PINE ISLAND ROAD STE 250
PLANTATION, FL 33324

New Principal Place of Business:

490 SAWGRASS CORPORATE PARKWAY
SUITE 100
SUNRISE, FL 33325

Current Mailing Address:

1000 S PINE ISLAND ROAD STE 250
PLANTATION, FL 33324

New Mailing Address:

490 SAWGRASS CORPORATE PARKWAY
SUITE 100
SUNRISE, FL 33325

FEI Number: 26-0700164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, ANDREW
1000 S PINE ISLAND ROAD STE 250
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

KRAMER, ANDREW
490 SAWGRASS CORPORATE PARKWAY
SUITE 100
SUNRISE, FL 33325 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:

03/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KRAMER, ANDREW
Address: 1000 S PINE ISLAND ROAD STE 250
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: LASKIN, RONI
Address: 1000 S PINE ISLAND ROAD STE 250
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: WEISS, JANE
Address: 1000 S PINE ISLAND ROAD STE 250
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KRAMER, ANDREW
Address: 490 SAWGRASS CORPORATE PARKWAY, SUITE 100
City-St-Zip: SUNRISE, FL 33325

Title: MGR (X) Change () Addition
Name: LASKIN, RONI
Address: 490 SAWGRASS CORPORATE PARKWAY, SUITE 100
City-St-Zip: SUNRISE, FL 33325

Title: MGR (X) Change () Addition
Name: WEISS, JANE
Address: 490 SAWGRASS CORPORATE PARKWAY, SUITE 100
City-St-Zip: SUNRISE, FL 33325

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: RONI LASKIN

MGR

03/26/2008

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