

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089470

FILED
Aug 20, 2008
Secretary of State

Entity Name: JADE PROPERTY DEVELOPMENT, LLC

Current Principal Place of Business:

1597 SW 194 TERR
PEMBROKE PINES, FL 33029

New Principal Place of Business:

12608 S. STONEBROOK CIRCLE
DAVIE, FL 33330

Current Mailing Address:

1597 SW 194 TERRACE
PEMBROKE PINES, FL 33029

New Mailing Address:

12608 S. STONEBROOK CIRCLE
DAVIE, FL 33330

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TAX RESOURCE CENTER OF FLORIDA INC
20401 NW 2 AVE
103
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

NOEL, STRACHAN
12608 S. STONEBROOK CIRCLE
DAVIE, FL 33330 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: NOEL STRACHAN

08/20/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: STRACHAN, NOEL
Address: 1597 SW 194 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM () Delete
Name: STRACHAN, JUDY
Address: 1597 SW 194 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM (X) Delete
Name: GUTHRIE, CAUDALEEN
Address: 1597 SW 194 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM (X) Delete
Name: WILLIAMS, JULIET
Address: 1597 SW 194 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STRACHAN, NOEL
Address: 12608 S. STONEBROOK CIRCLE
City-St-Zip: DAVIE, FL 33330

Title: MGRM (X) Change () Addition
Name: STRACHAN, JUDY
Address: 12608 S. STONEBROOK CIRCLE
City-St-Zip: DAVIE, FL 33330

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 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: NOEL STRACHAN

MGR

08/20/2008

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