

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000038835

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** JRCR, LLC.

**Current Principal Place of Business:**

3244 NW 45TH PL  
CAPE CORAL, FL 33993 US

**New Principal Place of Business:**

**Current Mailing Address:**

3244 NW 45TH PL  
CAPE CORAL, FL 33993 US

**New Mailing Address:**

**FEI Number:** 26-2475171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FREY, RICHARD W  
3244 NW 45TH PL  
CAPE CORAL, FL 33993 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  
**Name:** FREY, RICHARD W  
**Address:** 3244 SW 45TH PL  
**City-St-Zip:** CAPE CORAL, FL 33993 US

**Title:** MGRM  
**Name:** HOWE, RANIE J  
**Address:** 3244 NW 45TH PL  
**City-St-Zip:** CAPE CORAL, FL 33993 US

**Title:** MGRM  
**Name:** FLEMING, JAMES C  
**Address:** 3345 ECLIPSE DR  
**City-St-Zip:** JEFFERSON, MD 21755

**Title:** MGRM  
**Name:** FLEMING, JEAN L  
**Address:** 3345 ECLIPSE DR  
**City-St-Zip:** JEFFERSON, MD 21755

**Title:** MGRM  
**Name:** MICHAEL FREY, JOHN  
**Address:** 4120 WOODLYN TER  
**City-St-Zip:** YORK, PA 17402

**Title:** MGRM  
**Name:** SUSAN FREY, REBECCA  
**Address:** 4120 WOODLYN TER  
**City-St-Zip:** YORK, PA 17402

I hereby 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:** RICHARD W FREY

MGRM

04/22/2010

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