

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000078870

Entity Name: JPL TELECOM, LLC

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7436 SOUTH FEDERAL HWY  
PORT SAINT LUCIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8377  
PORT SAINT LUCIE, FL 34985 US

**New Mailing Address:**

7436 SOUTH FEDERAL HWY  
PORT SAINT LUCIE, FL 34952 US

FEI Number: 27-0756658

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LAFALAISE, JEAN-PATRICK  
1517 SW HIBISCUS STREET  
PORT SAINT LUCIE, FL 34983 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: MGR  
Name: LAFALAISE, JEAN-PATRICK  
Address: 1517 SW HIBISCUS STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: MGRM  
Name: LAFALAISE, SANDRA  
Address: 1517 SW HIBISCUS STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

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: JEAN-PATRICK LAFALAISE

MGR

04/26/2010

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