2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000228

Address:

City-St-Zip:

1415 HENDRY ST.

FT. MYERS, FL 33901

Entity Name: J.G.V. & ASSOCIATES, L.C.

FILED Feb 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5235 NAUTILUS DR. CAPE CORAL, FL 33904 **Current Mailing Address: New Mailing Address:** 5235 NAUTILUS DR. PO BOX 10-1113 CAPE CORAL, FL 33904 CAPE CORAL, FL 33910 FEI Number: 65-0737719 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VIACAVA, JOSEPH G JR 1415 HENDRY STREET US FORT MYERS, FL 33901 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete VIACAVA, LYNNE C Name: Name: Address: 5235 NAUTILUS DR. Address: City-St-Zip: CAPE CORAL, FL 33904 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: VIACAVA, LEE C Name: Address: 2271 FIRST STREET #35 Address: City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition VIACAVA, JOSEPH JR Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JOSEPH G. VIACAVA MGRM 02/11/2009