2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002834

Entity Name: JAC PROPERTY MANAGEMENT, L.L.C.

203 WEST 90TH ST., APT 7A

City-St-Zip: NEW YORK, NY 10024

Address:

FILED Jan 03, 2008 Secretary of State

Littly Na	IIIE. JAC FRO	PERTITIVIANAGEIVIENT, E.E.	J .	
Current Principal Place of Business:			New Principal Place of Business:	
	HINGTON STR /ER, NJ 08753			
Current Mailing Address:			New Mailing Address:	
	HINGTON STR	EET		
PO BOX 4 TOMS RIV	/ER, NJ 08754			
FEI Number	: 22-3781659	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:	
3067 EÁS FORT LAU	JDERDALE, FI			
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
SIGNATUI	RE:			
	Electror	ic Signature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () ROSELLI, MAR 585 BROOKSII TOMS RIVER, I	DE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () CITTA, ROSAN 21 PINE STREI TOMS RIVER, I	ĒΤ	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	MGRM ()	Delete HAJR	Title: Name:	() Change () Addition

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: ROSANNE L CITTA MGRM 01/03/2008