

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001626

Entity Name: JASMINE PARTNERS, LLC

FILED
Feb 25, 2009
Secretary of State

Current Principal Place of Business:

52 RILEY RD.
STE 332, % W. D. BROWN
CELEBRATION, FL 34747 US

New Principal Place of Business:

Current Mailing Address:

52 RILEY RD.
STE 332, % W. D. BROWN
CELEBRATION, FL 34747 US

New Mailing Address:

FEI Number: 65-0904585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, W D
52 RILEY ROAD
SUITE 332, % W. D. BROWN
CELEBRATION,, FL 334747 US

Name and Address of New Registered Agent:

BROWN, W D
52 RILEY ROAD
SUITE 332, % W. D. BROWN
CELEBRATION,, FL 34747 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:

02/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BROWN, W. DAVID
Address: 52 RILEY ROAD, STE 332
City-St-Zip: CELEBRATION, FL 34747 US

Title: MGRM () Delete
Name: BROWN, ARLENE A
Address: 52 RILEY ROAD, STE 332
City-St-Zip: CELEBRATION, FL 34747 `

ADDITIONS/CHANGES:

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: W. DAVID BROWN

MGRM

02/25/2009

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