2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003056

Entity Name: J.A.G.M. II L.L.C.

Name:

Address:

City-St-Zip:

SHELTON, MARYANN

MONTGOMERY CITY, MO 63361

ROUTE 3, BOX 37

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1418 SYCAMORE LAKE DRIVE FORISTELL, MO 63348 **Current Mailing Address: New Mailing Address:** 1418 SYCAMORE LAKE DRIVE FORISTELL, MO 63348 FEI Number: 52-2385348 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: SHELTON, JOHN D COHRS, DENIS A ESQ. 220 GULF BLVD. 2575 ULMERTON ROAD INDIAN ROCKS BEACH, FL US SUITE 210 CLEARWATER, FL 33762 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: DENIS A. COHRS 04/27/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete RUFKAHR, GARY L Name: Name: 1418 SYCAMORE LAKE DRIVE Address: Address: City-St-Zip: FORISTELL, MO 63348 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: RUFKAHR, ALANA Name: Address: 1418 SYCAMORE LAKE DRIVE Address: City-St-Zip: FORISTELL, MO 63348 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SHELTON, JOHN Name: Name: ROUTE 3, BOX 37 Address: Address: City-St-Zip: MONTGOMERY CITY, MO 63361 City-St-Zip: Title: MGR () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN SHELTON MGRM 04/27/2006