2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 17, 2006 08:00 AM Secretary of State DOCUMENT # M02000003466 1. Entity Name JES-JAX, LLC Principal Place of Business Mailing Address 180 NORTH WACKER DRIVE 180 NORTH WACKER DRIVE CHICAGO, IL 60606 CHICAGO, IL 60606 03212006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 61-1437920 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. DO NOT WRITE 2731 EXECUTIVE PARK DRIVE SUITE 4 IN THIS SPACE WESTON, FL 33331 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstalling) Filing Fee is \$50.00 U00000516298 Due by May 1, 2006 04/29/06-80244-009 50.00 MANAGING MEMBERS/MANAGERS 9. MGRM TOTE SHAFFER, JOHN E NAME STREET ADDRESS 180 N WACKER DRIVE #500 CHICAGO, IL 60608 CRY-ST-ZP ΠŒΕ NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it 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.

Tohn E Shaffer

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Managing Member