2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # M0400000628

1. Entity Name

JPI MANAGEMENT SERVICES GP LLC



FILED Jan 27, 2006 08:00 AN **Secretary of State**

Principal Place of Business

Mailing Address

600 EAST LAS COLINAS BLVD., SUITE 1800 IRVING, TX 75039

600 EAST LAS COLINAS BLVD., SUITE 1800 IRVING, TX 75039



01092006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0642246

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of cha	inging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNATURE_			
	Signature, typed or printed name of registered agent and title if applicable	(NOTE, Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2006		
9,	MANAGING MEMBERS/MANAGERS		
HILE NAME	MGR JPI INVESTMENT SERVICES, INC.		·

600 EAST LAS COLINAS BLVD., SUITE 1800 CITY-ST-ZIP IRVING, TX 75039 TITLE JPI INVESTMENT COMPANY, L.P. NAME STREET ADDRESS 600 EAST LAS COLINAS BLVD., SUITE 1800 CITY-ST-ZIP IRVING, TX 75039 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TIBE STREET ADORESS CITY-ST-7IP

U00000404276 02/06/06-80041-008 50.00

DO NOT WRITE IN THIS SPACE

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 if made under oath, that I am a managing member or manager of the similar true trial tria

SIGNATURE: //www R, OR AUTHORIZED REPRESENTATIVE

Thomas F. Kavanagh Asst. Vice President

Daysme Prione #