

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 17, 2007
Secretary of State

DOCUMENT# L98000001497

Entity Name: THE JADE GROUP, L.C.

Current Principal Place of Business:

1255 CLEVELAND ST
SUITE 101
CLEARWATER, FL 33755

New Principal Place of Business:

830 ISLAND WAY
CLEARWATER, FL 33767

Current Mailing Address:

830 ISLAND WAY
CLEARWATER, FL 33767

New Mailing Address:

FEI Number: 59-3527744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAUGHTER, DAVID B
830 ISLAND WAY
CLEARWATER, FL 33767 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SLAUGHTER, DAVID B
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MBR () Delete
Name: SLAUGHTER, BENNETTA
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767

Title: MBRM (X) Change () Addition
Name: SLAUGHTER, BENNETTA
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767

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.

SIGNATURE: DAVID B SLAUGHTER

MGRM

02/17/2007

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

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2006
Secretary of State

DOCUMENT# L98000001497

Entity Name: THE JADE GROUP, L.C.

Current Principal Place of Business:

1255 CLEVELAND ST
SUITE 101
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

830 ISLAND WAY
CLEARWATER, FL 33767

New Mailing Address:

FEI Number: 59-3527744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAUGHTER, DAVID B
830 ISLAND WAY
CLEARWATER, FL 33767 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SLAUGHTER, DAVID B
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767 US

Title: MBR () Delete
Name: SLAUGHTER, BENNETTA
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SLAUGHTER, DAVID B
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: DAVID B SLAUGHTER

MGRM

02/11/2006

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

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 01, 2005
Secretary of State

DOCUMENT# L98000001497

Entity Name: THE JADE GROUP, L.C.

Current Principal Place of Business:

1255 CLEVELAND ST
SUITE 200
CLEARWATER, FL 33755

Current Mailing Address:

1255 CLEVELAND ST
SUITE 200
CLEARWATER, FL 33755

New Principal Place of Business:

1255 CLEVELAND ST
SUITE 101
CLEARWATER, FL 33755

New Mailing Address:

830 ISLAND WAY
CLEARWATER, FL 33767

FEI Number: 59-3527744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SKALSKI, JOSEPH C
13770 - 58TH STREET N.
SUITE 304
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

SLAUGHTER, DAVID B
830 ISLAND WAY
CLEARWATER, FL 33767 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: DAVID B SLAUGHTER

07/01/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SLAUGHTER, DAVID B
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MBR () Change (X) Addition
Name: SLAUGHTER, BENNETTA
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID B SLAUGHTER

MGR

07/01/2005

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

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# L98000001497

Entity Name: THE JADE GROUP, L.C.

Current Principal Place of Business:

14010 ROOSEVELT BLVD., STE 708
CLEARWATER, FL 33762

New Principal Place of Business:

1255 CLEVELAND ST
SUITE 200
CLEARWATER, FL 33755

Current Mailing Address:

14010 ROOSEVELT BLVD., STE 708
CLEARWATER, FL 33762

New Mailing Address:

1255 CLEVELAND ST
SUITE 200
CLEARWATER, FL 33755

FEI Number: 59-3527744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKALSKI, JOSEPH C
14010 ROOSEVELT BLVD., STE 708
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

SKALSKI, JOSEPH C
13770 - 58TH STREET N.
SUITE 304
CLEARWATER, FL 33760 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:

04/26/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SLAUGHTER, DAVID B
Address: 2433 KENT PLACE
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SLAUGHTER, DAVID B
Address: 830 ISLAND WAY
City-St-Zip: CLEARWATER, FL 33767 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID B SLAUGHTER

MGR

04/26/2004

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


2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2003 8:00 am
Secretary of State

02-14-2003 90065 046 *****50.00

DOCUMENT # L98000001497

1. Entity Name
THE JADE GROUP, L.C.



Principal Place of Business
**14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762**

Mailing Address
**14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number **59-3527744**
Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**SKALSKI, JOSEPH C
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SLAUGHTER, DAVID B 2433 KENT PLACE CLEARWATER FL 33764	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *David B Slaughter* **2/12/03** 727-446-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (10/02)

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 18, 2002 8:00 am
Secretary of State

02-18-2002 90167 037 ****50.00

DOCUMENT # L98000001497

1. Entity Name
THE JADE GROUP, L.C.

Principal Place of Business 14010 ROOSEVELT BLVD., STE 708 CLEARWATER FL 33762	Mailing Address 14010 ROOSEVELT BLVD., STE 708 CLEARWATER FL 33762
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3527744	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

SKALSKI, JOSEPH C
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SLAUGHTER, DAVID B 2433 KENT PLACE CLEARWATER FL 33764	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *David B. Slaughter* **2/6/02** 727-446-1100 ext. 219
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (9/01)

2001 UNIFORM BUSINESS REPORT (UBR)

0018838 AF

DOCUMENT # **L98000001497**

1. Entity Name
THE JADE GROUP, L.C.

FILED

01 FEB -8 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762**

Mailing Address
**14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

4. FEI Number **59-3527744**

Applied For
 Not Applicable

City & State

Zip Country

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**SKALSKI, JOSEPH C
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SLAUGHTER, DAVID B 2433 KENT PLACE CLEARWATER FL 33764	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

100003708801--9
-02/19/01--0111-011
*******50.00 *****50.00**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: **DAVID B. SLAUGHTER** 2/5/01 446-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (1/1/00)

L9800001497

E. D. ARMSTRONG III
BRUCE W. BARNES
JOHN T. BLAKELY
BRUCE H. BOKOR
GUY M. BURNS
JONATHAN S. COLEMAN
MICHAEL T. CRONIN
ROBERT M. DAISLEY
ELIZABETH J. DANIELS

MARION HALE
SCOTT C. ILGENFRITZ
FRANK R. JAKES
TIMOTHY A. JOHNSON, JR.
SHARON E. KRICK
ROGER A. LARSON
JOHN R. LAWSON, JR.*
MICHAEL G. LITTLE
MICHAEL C. MARKHAM

STEPHANIE T. MARQUA
F. WALLACE POPE, JR.
ROBERT V. POTTER, JR.
DONALD P. REED
DARRYL R. RICHARDS
PETER R. RIVELLINI
DENNIS G. RUPPEL*
CHARLES A. SAMARKOS
JOHN A. SCHAEFER

CLAY C. SCOTT
PHILIP M. SEBASTEN
MERCY J. STAKELUM IV
JOAN M. VECCHIOLI
STEVEN H. WEDENBERGER
AMBER F. WILLIAMS
JULIUS J. ZSCHAU
*OF COUNSEL

PLEASE REPLY TO CLEARWATER

FILE 41568.102514

August 1, 2000

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: The Jade Group, L.C.

700003347547--9
-08/07/00--01099--006
*****55.00 *****55.00

Gentlemen: L98-1497

In connection with the above referenced transaction, enclosed kindly find an originally executed Articles of Amendment to Articles of Organization of The Jade Group L.C., and our firms check for \$55.00 to file same. Please also issue to us a certified copy of this document after filing.

If you have any questions with regard to this matter, please do not hesitate to contact us.

Sincerely,

Bonnie Rich
/br
Enc.

wlg/10
FILED
00 AUG -4 PM 1:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CLEARWATER OFFICE
911 CHESTNUT STREET
POST OFFICE BOX 1368
CLEARWATER, FLORIDA 33756-1368
TELEPHONE: (727) 461-1818
TELECOPIER (727) 441-8617
BANKRUPTCY TELECOPIER (727) 443-6548

TAMPA OFFICE
100 NORTH TAMPA STREET
SUITE 1800
POST OFFICE BOX 1100
TAMPA, FLORIDA 33602-5145
TELEPHONE (813) 225-2500
TELECOPIER (813) 223-7118

NAPLES OFFICE
975 SIXTH AVE. S
POST OFFICE BOX 1368
NAPLES, FLORIDA 34102
TELEPHONE: (941) 435-0035
TELECOPIER: (941) 435-9992

ARTICLES OF AMENDMENT
TO ARTICLES OF ORGANIZATION
OF
THE JADE GROUP, L.C.

The undersigned, as member of THE JADE GROUP, L.C., does hereby certify that the amendment provided for herein was adopted by the members on the 26th day of July, 2000.

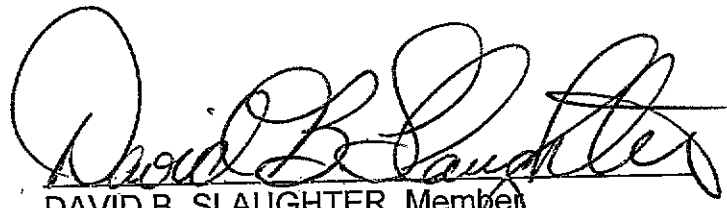
1. The date of filing of the Articles of Organization was August 19, 1998.
2. Amendment. ARTICLE VIII of the Articles of Organization is hereby deleted, and the following provision is inserted therein:

"The Company shall be dissolved upon the first of any of the following events to occur: (i) the vote to dissolve by all the Members accompanied by notice thereof to the Managers; or (ii) the expiration of the term of the Company unless it is extended by a majority of the Members."

3. Other Amendments. Except as provided herein, the Articles of Organization are not amended or modified in any manner.

The undersigned has executed these Articles of Amendment as of the date set forth below.

Date: 7/26/00



DAVID B. SLAUGHTER, Member

#218412 v1 - SLAUGHTER/articles of amendment to JADE LLC

SECRETARY OF STATE
TALLAHASSEE FLORIDA

00 AUG -4 PM 1:18

FILED

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L98000001497**

1. Entity Name
THE JADE GROUP, L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 FEB 22 PM 12:10

Principal Place of Business
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762

Mailing Address
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762-3820



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3527744		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent

SKALSKI, JOSEPH C
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE NAME MGR STREET ADDRESS CITY - ST - ZIP	SLAUGHTER, DAVID B 2433 KENT PLACE CLEARWATER FL 33764 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	700003161307-1 -03/07/00--01101--012 *****50.00 *****50.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>Mf 3/2/00</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *David B Slaughter* **DAVID B. SLAUGHTER** **1/14/2000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

CR2E083 (9/99)

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
APR -7 PM 5:00
SECRETARY OF STATE

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company
DOCUMENT # L98000001497

THE JADE GROUP, L.C.
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762

1a. Principal Place of Business Address
14010 ROOSEVELT BLVD., STE 7
CLEARWATER FL 33762

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

2a. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Organized or Qualified
08/19/1998

3a. State of Formation
FL

4. FEI Number
59-3527744
 Applied For
 Not Applicable

5. Date of Last Report

6. Certificate of Status Desired
\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

SKALSKI, JOSEPH C
14010 ROOSEVELT BLVD., STE 708
CLEARWATER FL 33762

8. Name and Address of New Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc.
City
Zip Code
FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations

SIGNATURE _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when new filing)
DATE _____

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	SLAUGHTER, DAVID B	300 BUTTONWOOD LANE 2433 KENT PLACE	HARBOR BLUFFS FL CLEARWATER FL 33764 400002842834 - E -04/16/99--01101--005 ****188.75 ****188.75 T.O. APR 11 1999

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *David B. Slaughter* 4/5/99 (727) 536-4328
DAVID B. SLAUGHTER

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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4003

FROM: EMPIRE CORPORATE KIT COMPANY
CONTACT: RAY STORMONT
PHONE: (305)541-3694

ACCT#: 072450003255

FAX #: (305)541-3770

NAME: THE JADE GROUP, L.C.

AUDIT NUMBER.....H98000015400

DOC TYPE.....LIMITED LIABILITY COMPANY

CERT. OF STATUS..0

PAGES..... 6

CERT. COPIES.....1

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W. P. Verifier	<i>MST</i>

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**ARTICLES OF ORGANIZATION
OF
THE JADE GROUP, L.C.**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be:

THE JADE GROUP, L.C.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company shall be:

14010 Roosevelt Blvd., Ste. 708
Clearwater, FL 33762

ARTICLE III - DURATION

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall terminate not later than January 1, 2050 unless the Company is earlier dissolved as provided in these Articles of Organization.

Prepared by:
Joseph C. Skalski
14010 Roosevelt Blvd., Ste. 708
Clearwater, FL 33762
(727) 536-5001
Florida Bar No. 0302085

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ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is:

Joseph C. Skalski
14010 Roosevelt Blvd., Ste. 708
Clearwater, FL 33762

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ARTICLE V - CAPITAL CONTRIBUTIONS

The members of the Company shall contribute to the capital of the Company the cash or property set forth in Exhibit "A".

ARTICLE VI - ADDITIONAL CAPITAL CONTRIBUTIONS

Each member shall make additional capital contributions to the Company only upon the unanimous consent of all the members.

ARTICLE VII - ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the Company except with the unanimous written consent of all the members of the Company and upon such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all the other members of the Company other than the member proposing to dispose of his or her interest approve of the proposed transfer by unanimous written consent.

ARTICLE VIII - TERMINATION OF EXISTENCE

The Company shall be dissolved upon the death, bankruptcy, or dissolution of a member or manager, or upon the occurrence of any other event that terminates the continued membership of a member in the Company, unless the business of the Company is continued by the consent of all the remaining members, provided there are at least two remaining members.

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ARTICLE IX - MANAGEMENT

The Company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the Company. These regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the initial manager of the company is:

David B. Slaughter
300 Buttonwood Lane
Harbor Bluffs, FL 33770

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these Articles of Organization at Clearwater, Florida on this 18th day of August, 1998.

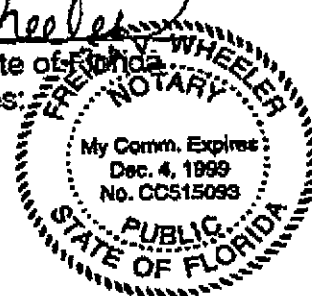
David B. Slaughter
David B. Slaughter

STATE OF FLORIDA

COUNTY OF PINELLAS

Before me personally appeared David B. Slaughter, to me well known to be the organizer of the above limited liability company and who subscribed the above Articles of Organization.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal this 18th day of August, 1998.

Freida Wheeler
NOTARY PUBLIC, State of Florida
My Commission Expires:


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ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the Articles of Organization of THE JADE GROUP, L.C., as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated company at the place designated in the Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity, and agrees to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and is familiar with and accept the obligations of the position as registered agent.



Joseph C. Skalski, Registered Agent

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Exhibit A

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of THE JADE GROUP, L.C., deposes and says:

1. The above named limited liability company has at least two members.
2. The total amount of cash contributed by the member(s) is \$300.
3. If any, the agreed value of property other than cash contributed by member(s) is \$0. A description of the property, if any, is attached and made a part hereto.
4. The total amount of cash or property anticipated to be contributed by member(s) is \$300. This total includes amounts from 2 and 3 above.

THE AFFIANT SAYS NOTHING FURTHER

Dated: 8-18-98

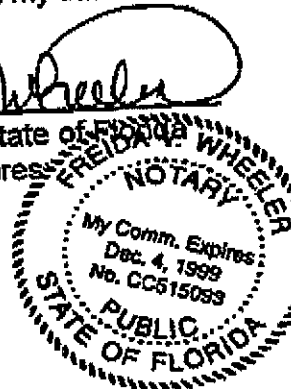
David B. Slaughter

 David B. Slaughter

Before me personally appeared David B. Slaughter, to me well known to be the organizer of the above limited liability company and who subscribed the above Affidavit of Membership and Contributions.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal this 18th day of August, 1998.

NOTARY PUBLIC, State of Florida
My Commission Expires



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