


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000065273

1. Entity Name
J. S. MONT INVESTMENTS, LLC



Principal Place of Business 5032 SW 10TH AVE CAPE CORAL, FL 33914	Mailing Address 5032 SW 10TH AVE CAPE CORAL, FL 33914
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DO NOT WRITE IN THIS SPACE



02012008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 13-4337956	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MONTPETIT, MICHELLE D
 5032 SW 10TH AVE
 CAPE CORAL, FL 33914**

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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 \$138.75
 After May 1, 2008 Fee will be \$538.75**

U00000839178
 03/05/08 00060 003 143.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MONTPETIT, JAY W 5032 SW 10TH AVE CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MONTPETIT, MICHELLE D 5032 SW 10TH AVE CAPE CORAL, FL 33914
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  DATE: **2/22/08** (651) 222-7045

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