

**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 20, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # M01000001201 1. Entity Name J & J PROPERTIES, L.L.C.	
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Principal Place of Business 5214 MONTGOMERY HIGHWAY DOTHAN, AL 36303	Mailing Address 5214 MONTGOMERY HIGHWAY DOTHAN, AL 36303
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**DO NOT WRITE IN THIS SPACE**



01122004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 63-1275070	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  FLORIDA & OFFSHORE BUSINESS FORMATION, INC 20 S. BROAD STREET BROOKSVILLE, FL 34601
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**DO NOT WRITE IN THIS SPACE**

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

**Filing Fee is \$50.00  
 Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GAUSE, JOHN P SR. PO BOX 8055 DOTHAN, AL 36303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GAUSE, JOANN PO BOX 8055 DOTHAN, AL 36303
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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:** *Joann P. Gause* **JOANN P. GAUSE** Mgr 1-14-04 334-983-5658  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #