## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **FILED** Jan 12, 2007 08:00 AN **Secretary of State**

DOCUMEN	A#TL	<i>J</i> 010	0000	1201

1. Entity Name J & J PROPERTIES, L.L.C.



Principal Place of Business

CITY-ST-ZIP

5214 MONTGOMERY HIGHWAY DOTHAN, AL 36303 \_

Mailing Address

**5214 MONTGOMERY HIGHWAY** DOTHAN, AL 36303



01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 63-1275070

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FLORIDA & OFFSHORE BUSINESS FORMATION, INC 20 S BROAD STREET

## DO NOT WRITE

BROOKSVILLE, FL 34601		IN THIS SPACE		
	named entity submits this statement for the purpose of cha lons of registered agent.	anging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accep		
SIGNATURE_	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent significate required when refrestating)  ZATE		
Fi	iling Fee is \$50.00 ue by May 1, 2007	U00000584028 01/12/07-80019-023 50.00		
9.	MANAGING MEMBERS/MANAGERS	The state of the s		
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			
TITLE MAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS				

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes 1 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.