## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L00000004205

1. Entity Name

JFT INVESTMENTS, L.L.C.



Principal Place of Business

1610 TENNESSEE AVENUE LYNN HAVEN, FL 32444 Mailing Address

1610 TENNESSEE AVENUE LYNN HAVEN, FL 32444

## FILED May 02, 2008 08:00 AN Secretary of State



02212008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3677589

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

TILLMAN, JEAN F 1610 TENNESSEE AVENUE LYNN HAVEN, FL 32444

CITY-ST-ZIP

SIGNATURE:

## 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     am familiar with, and accept the obligations of registered agent.			
SIGNATURE		(NOTE: Registered Agent signature required when reinstating)	DATE
FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TILLMAN, JEAN F 1610 TENNESSEE AVENUE LYNN HAVEN, FL 32444		U00000943330 05/29/08-80055-010 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME			

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 limited liability company or the receiver or trustee episowered to execute this report as required by Chapter 608, Florida Statutes

D OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE