### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **DOCUMENT # L00000006686**

1. Entity Name JJN, LC



FILED Feb 12, 2007 08:00 AM Secretary of State

Principal Place of Business

4358 QUEEN ELIZABETH WAY NAPLES, FL 34119 Mailing Address

4358 QUEEN ELIZABETH WAY NAPLES, FL 34119



02072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3653688 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

NAPLES-LAWDOCK, INC. 1395 PANTHER LANE SUITE 300 NAPLES, FL 34109

## 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\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

#### Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
MILE	MGRM
NAME	NOYES, JOHN A
STREET ADDRESS	7000
CITY-ST-ZIP	NAPLES, FL 34119
mue	MGR
NAME	NOYES, JUDITH A
STREET ADDRESS	4358 QUEEN ELIZABETH WAY
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filing does not qualify	

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# DO NOT WRITE IN THIS SPACE

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:

THE SERVICE HAVE OF STORMS WANGED WERE OF AUTHORITE BEFORE SELECTATIVE

1 02/

239-591-3824

Daytime Phone #