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## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L00000008543** 

1. Entity Name
J & D LENDING, LLC



Principal Place of Business

Mailing Address

3829 PARTRIDGE PLACE SOUTH QUAIL RIDGE BOYNTON BEACH, FL 33436

3829 PARTRIDGE PLACE SOUTH QUAIL RIDGE BOYNTON BEACH, FL 33436

FILED Apr 30, 2007 08:00 A Secretary of State



04252007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	 	Applied For
59-3660846	$\Box$	Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

A.G.C. CO. 200 SOUTH ORANGE AVENUE, SUITE 2300 ORLANDO, FL 32801

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<ol> <li>The above named entity submits this statement for the purpose of ch the obligations of registered agent.</li> </ol>	anging its registered office or registered agent, or both, in t	the State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DAYE
Filing Fee Is \$50.00 Due by May 1, 2007		

J.	MANAGINA MEMBENG/MANAGING
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LASS, E. DONALD 3829 PARTRIDGE PLACE SOUTH QUAIL RIDGE BOYNTON BEACH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PLANGERE, JULES L JR. 3829 PARTRIDGE PLACE SOUTH QUAIL RIDGE BOYNTON BEACH, FL 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

MANAGING MEMBERS/MANAGERS

## 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR A

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4/25/07

732/751-1119

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