


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000010999	
1. Entity Name C & J LEASING COMPANY OF LEE COUNTY, L.L.C.	

Principal Place of Business 2150 WEST FIRST STREET FORT MYERS, FL 33901	Mailing Address 2150 WEST FIRST STREET FORT MYERS, FL 33901
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01192007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1050740	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent COWELL, BLANCHE 2150 WEST FIRST STREET FORT MYERS, FL 33901

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHEELER, CATHLEEN J 10060 SAN PABLO ST FT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CALLAHAN, JOANNA L 15071 N PEBBLE LN FT MYERS, FL
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<p>U000000672216 03/28/07-80061-010 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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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 Cathleen J. Wheeler **CATHLEEN J. WHEELER** 315-07 234-334-2039
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #