2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000002688

1. Entity Name

J & J EQUINE INVESTMENTS, L.C.



FILED Apr 03, 2006 08:00 AM Secretary of State

Principal Place of Business

Malling Address

5285 S.W. 85TH ST. OCALA, FL 34476

5285 S.W. B5TH ST. OCALA, FL 34476



03032006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3703387

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

LACEFIELD, JERRY N JR. 5285 S.W. 85TH ST. OCALA, FL 34476

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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 tamiliar with, and accept
	the obligations of registered agent.	

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

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM LACEFIELD, JUDITH 1311 WATER OAK WAY N. BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM LACEFIELD, JERRY N JR. 5285 S.W. 85TH ST. OCALA, FL 34476
TITLE NAME STREET ADORESS CITY-ST-ZIP	-
TITLE NAME STREET ADDRESS GITY-ST-ZIP	
Title Name Street address City-St-Zip	
tale Name Street address	

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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 empowered to execute this report as required by Chapter 508, Florida Statutes.

SIGNATURE AND THE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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