

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 07, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000005725

1. Entity Name
JDJ, LLC



Principal Place of Business
**3324 ANTIGUA DRIVE
PUNTA GORDA, FL 33950**

Mailing Address
**3324 ANTIGUA DRIVE
PUNTA GORDA, FL 33950**



02232006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1142305	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**LENNOX, DAVID R
3324 ANTIGUA DRIVE
PUNTA GORDA, FL 33950**

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LENNOX, DAVID R 3324 ANTIGUA DRIVE PUNTA GORDA, FL 33950
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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:

David R. Lennox **DAVID R. LENNOX**

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

03 Mar 2006 941-505-4283

Date

Daytime Phone #