2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 24, 2006 0

ANNUAL REPORT				Apr 24, 2006 08:00 .
	MENT # L020000079	978		Secretary of State
1. Entity Name JENA DEVELOPMENT COMPANY, LLC				
OCAN BE				
Principal Plac	e of Business	Mailing Address		
509 N. PATT		509 N. PATTERSON ST.		
VALDOSTA, (GA 31601	VALDOSTA, GA 31601		
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L	O NOT WINTE	IN THIS SEP	ICL.	4. FEI Number Applied For 03-0417318 Not Applicable
			/ /2 mmmar 1860 / /21 1	\$5.00 Additional
	an Appendix 5.5 h. six per title in any high or shifted any et 1,70			5. Certificate of Status Desired Fee Required
	6. Name and Address of Current R	egistered Agent		more for authorization and property finds again a against an an an amount died in the second action of an amount of
AUTREY, WALTER G				DO NOT WOITE
235 W, GULF BEACH DR., STE. G				DO NOT WRITE
ST. GEORGE ISLAND, FL 32328				IN THIS SPACE
	named entity submits this statement for tions of registered agent.	the purpose of changing its registi	ered office or register	red agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent ar	d title if applicable. (NOTE, Regist	ered Agent signature required	d when reinstating) DATE
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D	iling Fee is \$50.00 ue by May 1, 2006			UNDONNERSAAR
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9.	MANAGING MEMBER	RS/MANAGERS		The second secon
TITLE NAME	WAYNE, FANN		1	
STREET ADDRESS	509 N PATTERSON ST, STE 100			The state of the s
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NAME			1	IN THIS SPACE
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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 eath; 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:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

4-20-6 229-242-7573

Daytime Phone #