2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000001307

1. Entity Name JRL INVESTMENTS; LLC



Principal Place of Business Mailing Address

6. Name and Address of Current Registered Agent

4580 JULINGTON CREEK ROAD JACKSONVILLE, FL 32258

DOSTIE, RENE JR

SIGNATURE:

4580 JULINGTON CREEK ROAD JACKSONVILLE, FL 32258

FILED Jan 10, 2008 08:00 A Secretary of State



01072008 No Chg-LLC

CR2E083 (12/07)

١.	FEI Number	
	65-1184372	

\$5.00 Additional Fee Required

Applied For Not Applicable

5. Certificate of Status Desired

DO NOT WRITE

4580 JULINGTON CREEK ROAD JACKSONVILLE, FL 32223			IN THIS SPACE	
	named entity submits this statement for the purpose of chang tions of registered agent.	ing its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		,	
9. ITTLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM WARWICK, FLOYD JR 22 SOUTH 3RD ST AMELIA ISLAND, FL 32084		U00000778709 01/11/08-80008-014 138.75	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM DOSTIE, RENE JR 4550 JULINGTON CREEK RD JACKSONVILLE, FL 32258		01/11/08-80008-014 138.75	
NAME STREET ADDRESS CITY+ST-ZIP			NOT WRITE	
NAME STREET ADDRESS CITY+ST-ZIP		IN `	THIS SPACE	
INLE NAME STREET ADDRESS CITY-ST-ZIP			:	
INTLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby of indicated limited lia	certify that the information supplied with this filling does not gue on this report is true and accurate and that my signature shall builty company of the receive or trustee empowered to execute the company of the receive or trustee empowered to execute the company of the receive of the company of the com	ualify for the exemptions contained in Chapter 1 ill have the same legal effect as if made under o ble this report as required by Chapter 608. Floric	Florida Statutes. I further certify that the information ath, that I am a managing member or manager of the la Statutes.	

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE