2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000009292

1. Entity Name
J&S HOLDINGS, LLC

Principal Place of Business

16 SOUTH WATERVIEW DRIVE PALM COAST, FL 32137 US Mailing Address

16 SOUTH WATERVIEW DRIVE PALM COAST, FL 32137 US

FILED Mar 30, 2006 08:00 AM Secretary of State



03272006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 27-0057143 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regulred

6. Name and Address of Current Registered Agent

CHIUMENTO, MICHAEL D 4 OLD KINGS ROAD NORTH, SUITE B PALM COAST, FL 32137

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			ITIIO OFACE
8. The above the obligat	named entity submits this statement for the purpose of char ilons of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and acce-
SIGNATURE.	Signature, typed or pointed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE MAMC STREET ADDRESS CITY-ST-ZIP	MGRM DEVORE, SANDRA L 64 CHRISTOPHER COURT PALM COAST, FL 32137		DUUUUUUASA988 04/12/06-80065-062 50.00 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHAFFER, JEAN M 16 SOUTH WATERVIEW DRIVE PALM COAST, FL 32137		
TITLE NAME STREET ADDRESS GITY-ST-ZIP		DO	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	
TITLE NAME STREET ADDRESS GTY-ST-2IP			
TITLE MANE STREET ACORESS GUY-SI-ZIP			

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 608, Florida Statutes.

SIGNATURE:

JRE: JAN M. MAGGET STORMED AND OF PRINTED NAME OF SIGNING MANADING METAGER, OR AUTHORIZED REPRESENTATIVE

March 28, 2000

(36) 445-7337

Deylime Phone #