



**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # L03000011555 1. Entity Name JALOR ENTERPRISES, LLC	
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Principal Place of Business 708 SW LONG LAKE CT. PALM CITY, FL 34990	Mailing Address 708 SW LONG LAKE CT. PALM CITY, FL 34990
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DO NOT WRITE IN THIS SPACE



04272007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 58-2668391	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CHAPMAN, JOHN W
708 SW LONG LAKE CT.
PALM CITY, FL 34990

**DO NOT WRITE
IN THIS SPACE**

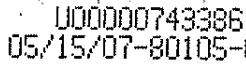
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2007**

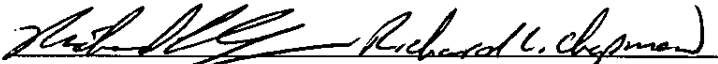
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHAPMAN, JOHN W 708 SW LONG LAKE CT. PALM CITY, FL 34990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHAPMAN, RICHARD 35 SE BEECH TREE LANE STUART, FL 34994
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHAPMAN, WILLIAM 4349 LIGUSTRUM DRIVE MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	


05/15/07-80105-022 50.00

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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:  4/27/07 772-631-4448
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #