

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 09, 2008 8:00 am
Secretary of State

05-19-2008 90188 002 ***138.75

DOCUMENT # L03000050873

1. Entity Name
J&S ENT, LLC



Principal Place of Business
**1400 SOUTH MAGNOLIA EXTENSION
OCALA, FL 34471**

Mailing Address
**1400 SOUTH MAGNOLIA EXTENSION
OCALA, FL 34471**

30010206



04242008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0470355

Applied For
Not Applicable

5. Certificate or status Desired ☐ **\$0.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**B&C CORPORATE SERVICES OF CENTRAL FL, INC
390 N ORANGE AVE, STE 1100
ORLANDO, FL 32801**

**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

Jeffrey D. Fleigel
Signature, printed or printed name of registered agent and their expiration.

(NOTE: Registered Agent Signature required when reappointing)

6-16-08

DATE

**FILE NOW! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
MGR
NAME
FLEIGEL, JEFFREY D
STREET ADDRESS
1400 SOUTH MAGNOLIA EXTENSION
CITY-ST-ZIP
OCALA, FL 34471

TITLE
MGR
NAME
FLEIGEL, SUZANNE S
STREET ADDRESS
1400 SOUTH MAGNOLIA EXTENSION
CITY-ST-ZIP
OCALA, FL 34471

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Jeffrey D. Fleigel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone

6/16/08
7/2/08