

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000050925

1. Entity Name
JACQUELINE'S PLACE, LLC



Principal Place of Business
108 GREGORY RD.
WEST PALM BEACH, FL 33405 US

Mailing Address
108 GREGORY RD.
WEST PALM BEACH, FL 33405 US



03172007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0458365	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ROBINSON, JACQUELINE Y
108 GREGORY RD.
WEST PALM BEACH, FL 33405

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

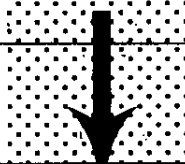
**Filing Fee is \$50.00
Due by May 1, 2007**

U00000729065
05/02/07-80024-015 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROBINSON, JACQUELINE Y 108 GREGORY RD. WEST PALM BEACH, FL 33405
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**SIGN
HERE**



**DO NOT WRITE
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 _____

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

JACQUELINE Y ROBINSON

4/14/2007

561-352-7677

Date

Daytime Phone #