


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000051626 1. Entity Name J&S MANAGEMENT, LLC	
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Principal Place of Business 15400 EMERAL COAST PKWY SUITE 504 DESTIN, FL 32541	Mailing Address 15400 EMERAL COAST PKWY SUITE 504 DESTIN, FL 32541
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DO NOT WRITE IN THIS SPACE



01312007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 27-0072918	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent LINDSAY, ALLEN W JR 5218 WILLING STREET MILTON, FL 32570

**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 reinstating) DATE _____


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

000000620386
02/09/07-80059-012 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOCKLEAR, STEVE 15400 EMERAL COAST PKWY STE 504 DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LOCKLEAR, JEANNE 15400 EMERAL COAST PKWY STE 504 DESTIN, FL 32541
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**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:  **1-31-07 (850) 232-2658**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #