2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000052014

1. Entity Name
J & L RANCH, L.L.C.



04-01-2005 90155 013 ****50.00

FILED

Apr 01, 2005 8:00 am Secretary of State

Principal Place of Business

Mailing Address

7465 NORTH PALAFOX STREET PENSACOLA, FL 32503

7465 NORTH PALAFOX STREET PENSACOLA, FL 32503



01112005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0477409 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6.	Name	and	Address	of Current	t Registered	Agent	

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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 prefed name of registered agent and life of applicable. (NOTE: Registered Agent signature required when rematating)

DATE

Filing Fee is \$50.00 Due by May 1, 2005

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOORE, DONALD W 3337 HARVEY LANE PACE, FL 32571					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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NAME STREET ADDRESS CITY-ST-ZIP						
11. I hereby certify that the information supplied with this filling does not qualify for the exe						

MANAGING MEMBERS/MANAGERS

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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 eath; that I am a managing member or manager of the limited liability company of the receiver or rust be empowed to prepare this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 👱

DONALD W. MOORE

3/15/05

(850)478-6150

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

Date

Daytime Phone #