

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000007266

1. Entity Name
JL PETR LLC



Principal Place of Business
5340-H ELMHURST RD
WEST PALM BEACH, FL 33417

Mailing Address
5340-H ELMHURST RD
WEST PALM BEACH, FL 33417



07052007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
15-7452663

Applied for
Not Applicable

5. Certificate of Status Desired ☐

\$5.00
Fee Required

PETRILLO, JOHN L
5340-H ELMHURST RD
WEST PALM BEACH, FL 33417

**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, the named agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when necessary)

DATE

**Filing Fee is \$50.00
Due by September 14, 2007**

2. MANAGING MEMBER INFORMATION

TITLE	MGRM
NAME	PETRILLO, JOHN L
STREET ADDRESS	5340-H ELMHURST RD
CITY-STATE-ZIP	WEST PALM BEACH, FL 33417
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U000000768979
07/16/07-80010-002 50.00

**DO NOT WRITE
IN THIS SPACE**

9. I, the undersigned, certify that the information supplied with this filing complies with the requirements contained in Chapter 608, 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 appointed 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

7/17/07

(561) 683-5841