## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000015058

Entity Name: J&LLLC

FILED May 06, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

60 SHADOW LN 59 SHADOW LN

LAKELAND, FL 33813 US LAKELAND, FL 33813 US

Current Mailing Address: New Mailing Address:

PO BOX 924

LAKE ALFRED, FL 33850 US

FEI Number: 20-0784818 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREENE, LEE MICHAEL

60 SHADOW LANE

59 SHADOW LANE

LAKELAND EL 33813 LIS

LAKELAND, FL 33813 US LAKELAND, FL 33813 US

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.

SIGNATURE: LEE GREENE 05/06/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 GREENE, LEE
 Name:
 GREENE, LEE

 Address:
 60 SHADOW LANE
 Address:
 59 SHADOW LANE

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:
 LAKELAND, FL 33813

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BRILEY, JAMES
 Name:

 Address:
 430 S RAMONA AVE
 Address:

 City-St-Zip:
 LAKE ALFRED, FL 33850
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LEE GREENE MGR 05/06/2008