

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 12, 2007 8:00 am**  
**Secretary of State**

04-12-2007 90184 003 \*\*\*\*50.00

**DOCUMENT # L04000018347**

1. Entity Name  
**J & J CHARTER SERVICE, LLC**



Principal Place of Business  
**3321 PITCHER PLANT CIRCLE  
PENSACOLA, FL 32506**

Mailing Address  
**P.O. BOX 34240  
PENSACOLA, FL 32507**



03302007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**NOT APPLICABLE**

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**PAYNE, JAMES A  
3321 PITCHER PLANT CIRCLE  
PENSACOLA, FL 32506**

**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 renewing)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAYNE, JAMES A 3321 PITCHER PLANT CIRCLE PENSACOLA, FL 32506
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAYNE, JUDY A 3321 PITCHER PLANT CIRCLE PENSACOLA, FL 32506
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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:** JAMES A. PAYNE

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

3/31/07 (850) 492-5231

Date

Daytime Phone #