

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000075785

1. Entity Name
101 LOVEJOY, L.L.C.



Principal Place of Business
101 LOVEJOY ROAD
FORT WALTON BEACH, FL 32547

Mailing Address
P.O. BOX 292
NICEVILLE, FL 32588



04032006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
41-2154920

Applied Fu
Not Applic.

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

8. Name and Address of Current Registered Agent

ANCHORS, C. LEDON
909 MAR WALT DRIVE
SUITE 1014
FORT WALTON BEACH, FL 32547

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MASSING, SANDRA C
STREET ADDRESS	P.O. BOX 292
CITY-ST-ZIP	NICEVILLE, FL 32588
TITLE	MGR
NAME	MASSING, ALAN
STREET ADDRESS	P.O. BOX 292
CITY-ST-ZIP	NICEVILLE, FL 32588
TITLE	MGR
NAME	SUWANEE REALTY COMPANY
STREET ADDRESS	1980 MORGAN WAY
CITY-ST-ZIP	BUFORD, GA 30518
TITLE	MGR
NAME	VJR ENTERPRISES, INC.
STREET ADDRESS	738 GLEN VALLEY WAY
CITY-ST-ZIP	DACULA, GA 30019
TITLE	MGR
NAME	PROKESCH, RICHARD C
STREET ADDRESS	3029 CRAZY TRAIL
CITY-ST-ZIP	ATLANTA, GA 30345
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000495420
04/21/06-80010-004 50.00

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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 a limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: *Sandra C. Massing*

4306 850-586-500