2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 05, 2007 08:00 All Secretary of State

DOCUMENT # L04000091928 1. Entity Name JOPA, LLC		
Principal Place of Business 6021 HERON POND DRIVE	Mailing Address 6021 HERON POND DRIVE-	4.51 A. 1

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PORT ORANGE, FL 32128

04032007 No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For 81-0659947 Not Applied For Not Applicable

5. Certificate of Status Desired Fee Required Fee Required

6. Name and Address of Current Registered Agent

TERRELL, JOHN R 6021 HERON POND DRIVE PORT ORANGE, FL 32128

PORT ORANGE, FL 32128 US

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	oove named entity submits this statement for the purpose of ch digations of registered agent.	hanging its registered office or registered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNAT			
	Signature, typad or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

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

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGRM	
NAME	TERRELL, JOHN R	
STREET ADDRESS	6021 HERON POND DRIVE	
CITY-ST-ZIP	PORT ORANGE, FL 32128	
TITLE	MGRM	
NAME	TERRELL, PAT	
STREET ADDRESS	6021 HERON POND DRIVE	
CITY-ST-ZIP	PORT ORANGE, FL 32128	
TITLE		
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TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the		

U00000690919 04/12/07-80010-004 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 the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE: Patricia B. Tened

4-3-07

286-304-1964

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

Date

Daytime Phone #