

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2007 08:00 A
Secretary of State

DOCUMENT # L05000027885

1. Entity Name
JLS INVESTMENTS, LLC



Principal Place of Business
4385 S. CHARLES ALBERT POINT
HOMOSASSA, FL 34448

Mailing Address
P.O. BOX 1090
BROOKFIELD, WI 53008



01032007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1725674

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MAGLIO, JOSEPH G
4385 SOUTH CHARLES ALBERT POINT
HOMOSASSA, FL 34448

**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 reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MAGLIO, JOSEPH G
STREET ADDRESS	4385 SOUTH CHARLES ALBERT POINT
CITY-ST-ZIP	HOMOSASSA, FL 34448
TITLE	MGRM
NAME	MAGLIO, ROCHELLE M
STREET ADDRESS	18541 FOLLETT DRIVE
CITY-ST-ZIP	BROOKFIELD, WI 53045
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____

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

JACK MAGLIO

1/3/07

Date

(262) 797-8919

Daytime Phone #