2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000032590				
1.	Entity Name			
J	& R RENTALS LLC			



Principal Place of Business

5867 54TH AVE. NORTH ST. PETERSBURG, FL 33709 Mailing Address

5867 54TH AVE. NORTH ST. PETERSBURG, FL 33709



DO NOT WRITE IN THIS SPACE

01032008 No Chg-LLC CR2E083 (12/07)

4. FEI Number	 Applied For
NOT APPLICABLE	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

ØENLINGER, RICHARD L 5867 54TH AVE. NORTH ST. PETERSBURG, FL 33709

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	Signature, typed or printed name of registered agent and little if applicable,	(NOTE: Registered Agent signature required when reinstating)	DATE		
SIGNATURE					
	the obligations of registered agent.				
	the obligations of registered agent.		, , , , , , , , , , , , , , , , , , , ,		
- {	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 ac	cept	

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000775849 01/08/08-80046-018 138.7

9,	MANAGING MEMBEHS/MANAGEHS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWNER DENLINGER, RICHARD L 5867 54TH AVE N ST PETERSBURG, FL 33709			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OTTETERODORO, TE 35705			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling does not qualify for the ex				

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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 his report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

1/3/08 727.541-468

Daytime Phone #