## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L05000047865** 

.1. Entity Name J-W-T PROPERTIES, LLC



FILED Jan 09, 2008 08:00 AN Secretary of State

Principal Place of Business

371847 HENRY SMITH ROAD HILLIARD, FL 32046

Mailing Address

371847 HENRY SMITH ROAD HILLIARD, FL 32046



01052008 No Chg-LLC

CR2E083 (12/07)

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

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SMITH, WILLIAM G JR. 371847 HENRY SMITH ROAD HILLIARD, FL 32046

## DO NOT WRITE IN THIS SPACE

0 (7)		d office or registered agent, or both, in the State of Florida. I am familiar with, and accept
	named entity submits this statement for the purpose of changing its registere ions of registered agent.	d office of registered agent, or both, in the state of Florida. Tall fall lines with, and sociept
DIONATUDE	• • • • • • • • • • • • • • • • • • •	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered	Agent signature required when reinstating) DATE
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75	
Aitoi maj		U00000776809
9.	MANAGING MEMBERS/MANAGERS	01/ <del>09/08-80037-018 138.75</del>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, WILLIAM G JR. 371847 HENRY SMITH ROAD HILLIARD, FL 32046	
NAME STREET ADDRESS CITY-ST-ZIP	134 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	,
TITLE	SENTE SERVICE SERVICE SERVICES	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP!!!	in — Programme State of State	
TITLE NAME		
STREET ADDRESS CITY-ST_ZIP	is to Paking	
11. I hereby indicated	certify that the information supplied with this filing does not qualify for the ex on this report is true and accurate and that my signature shall have the san	emptions contained in Chapter 119, Florida Statutes. I further certify that the information ne legal effect as if made under oath; that I am a managing member or manager of the

fimited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.