

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90080 006 \*\*\*\*50.00

DOCUMENT # L05000085727

1. Entity Name  
JT TRIM L.L.C.



Principal Place of Business  
4734 PLYMOUTH LANE  
LAKELAND, FL 33810

Mailing Address  
4734 PLYMOUTH LANE  
LAKELAND, FL 33810

2. Principal Place of Business  
704 FISH HATCHERY ROAD  
Suite, Apt. #, etc.

3. Mailing Address  
704 FISH HATCHERY ROAD  
Suite, Apt. #, etc.



04072006 Chg-LLC CR2E083 (11/05)

City & State  
LAKELAND, FL

City & State  
LAKELAND, FL

4. FEI Number  
25-1925450

Applied For  
Not Applicable

Zip  
33801

Country  
USA

Zip  
33801

Country  
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HOLDORFF, JESS E  
4734 PLYMOUTH LANE  
LAKELAND, FL 33810

7. Name and Address of New Registered Agent

Name  
Jason T. Racer

Street Address (P.O. Box Number is Not Acceptable)  
704 Fish Hatchery Road

City  
Lakeland, FL Zip Code  
33801

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 *Jason Todd Racer* 4-26-06 JASON Todd Racer

DATE

Filing Fee is \$50.00  
Due by May 1, 2006

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
HOLDORFF, JESS E  
4734 PLYMOUTH LANE  
LAKELAND, FL 33810 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
RACER, JASON T  
704 FISH HATCHER ROAD  
LAKELAND, FL 33801 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
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10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP  
☐ Change ☐ Addition

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: *Jason Todd Racer* 4-26-06 863 670 9572 JASON Todd Racer

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

Date

Daytime Phone #