## 2007 LIMITED LIABILITY COMPANY

## **ANNUAL REPORT DOCUMENT # L05000086946** 1. Entity Name J. T. WINTON, LLC Principal Place of Business Mailing Address 115 ANCHOR DRIVE 115 ANCHOR DRIVE KEY LARGO, FL 33037 KEY LARGO, FL 33037

**FILED** Apr 09, 2007 08:00 Al Secretary of State



## DO NOT WRITE IN THIS SPACE

04022007 No Chg-LLC CR2E083 (11/05)

Applied For 4. FEI Number 02-0751105 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

WINTON, JAMES T 115 ANCHOR DRIVE KEY LARGO, FL 33037

## 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.				
SIGNATURESignature, typed or printed name of registered agent and title if applicable (NOTE: Registered A			prature required when references	DATE
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	MGR			
NAME	WINTON, JAMES T			
STREET ADDRESS	115 ANCHOR DRIVE			
CITY-ST-ZIP	KEY LARGO, FL 33037		U O A A A	00000697411 8/07-80040-014 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE