

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000113949

Entity Name: JJL ENTERPRISES LLC

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1765 NINE MILE RD.  
SUITE 1 #216  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

1765 NINE MILE RD.  
SUITE 1 #216  
PENSACOLA, FL 32514

**New Mailing Address:**

FEI Number: 20-3921975

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LECCESE, JOSEPH J MGRM  
1765 NINE MILE RD, STE. 1, #216  
PENSACOLA, FL 32514 US

**Name and Address of New 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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LECCESE, JOSEPH J  
Address: 1765 NINE MILE RD, STE. 1, #216  
City-St-Zip: PENSACOLA, FL 32514

Title: MGRM  
Name: LECCESE, MAUREEN  
Address: 1765 NINE MILE RD, STE. 1, #216  
City-St-Zip: PENSACOLA, FL 32514

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: JOSEPH J. LECCESE

MGRM

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date