## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT.

FILED May 03, 2007 8:00 am Secretary of State

DOCUMENT # L06000024809  1. Entity Name JETHRO BAITS L.L.C.						04-19-2007 90035 001 ****50.00		
Principal Plac		Mailing Address				<b>3</b> 1	ΠΛΛοστω	
2845 BERKLEY RD Auburndale, Fl. 33823		2845 BERKLEY RD Auburndale, Fl. 33823						
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2. Principal P	face of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt.	#. etc.	Suite, Apt. #. etc.		04162007	Chg-LLC	CR2E083 (12/06)	)	
City & State		City & State		4. FEI Numt	Xer .		pplied For	
Zip	Country	Zip	Countr		5 Continue	e of Status Desired	□ \$5.00 Ad	ot Applicable
	Name and Address of Current	Registered Agent	1			d Address of New R	Fee Require	ed
	·			Name	· · · · · · · · · · · · · · · · · · ·	UI NEW M		
JEFFERY KEITH WINDISMAN 2845 BERKLEY RD			-	Street Ad	dress (P.O. Box Numi	(P.O. Box Number is Not Acceptable)		
AUBURNE	DALE, FL 33823		-					
			ŀ	City		<del></del>	Zip Cod	ie .
8. The above	named entity submits this statement for	r the numose of changing its	s recisterer	_ '	registered agent, or b	oth in the State of Elo	FL.	
the obligat	ions of registered agent.	The perpendict or analysing its	3 109/3/6/6/	o onice or r	registered agent, or or	Jan, an one State Of Fic	TIOS. FERTI ISTRIBUS WILL.	and accept
SIGNATURE	Signature, typed or printed name of registered agent	end tide if applicable. (NO	TE: Registered	Agent signatur	e required when renstating)		DATE	
	lling Fee is \$50,00 ue by May 1, 2007				Make check payable to Fiorida Department of State			
9 TILE	MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/	CHANGES	
11105	Lucin				1827.75			
NAME STREET ADDRESS CITY-ST-ZIP	MGR JEFFERY KEITH WINDISMAN 2845 BERKLEY RD AUBURNDALE, FL 33823	☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS	TMGR STEVE:WA 2845 BERI AUBURA MU	LDO WINDI KLEY RO.	SMAN Change	Z Addition
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11. I hereby certify that the information supplied with this filling 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 it made under oath; that I am a managing member or manager of the limited stability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

4/30/07