

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000058827

FILED
Jan 29, 2008
Secretary of State

Entity Name: J & D CHANEY SERVICE, LLC.

Current Principal Place of Business:

508 MYRTLE AVENUE
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

508 MYRTLE AVENUE
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: 20-5006696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANEY, JOHN L
508 MYRTLE AVENUE
GREEN COVE SPRINGS, FL 32043 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: MGR () Delete
Name: CHANEY, JOHN L
Address: 508 MYRTLE AVENUE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: MGR () Delete
Name: SNOW, BRADLEY AUSTIN
Address: 12653 DEEDER LANE
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGR () Delete
Name: DUFUR, KEVIN W
Address: 2299 STAUFFER ROAD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: CLARK, RICHARD B
Address: 2830 WATINS RD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOHN L CHANEY

MGR

01/29/2008

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