


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90079 031 ****55.00

| | | | | | |
|---|--|--|---|---|--|
| DOCUMENT # L06000058925 | | | |  | |
| 1. Entity Name GAJ, LLC | | | | | |
| Principal Place of Business 25 LAKE AVE WINTER HAVEN, FL 33880 | | | Mailing Address 25 LAKE AVE WINTER HAVEN, FL 33880 | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | | |
| 6. Name and Address of Current Registered Agent JENNINGS, GREGORY 25 LAKE AVE WINTER HAVEN, FL 33880 | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | | |
| 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 _____ (NOTE: Registered Agent signature required when registering) | | | | | |
| Filing Fee is \$50.00 Due by May 1, 2007 | | Make check payable to Florida Department of State | | | |
| 9. MANAGING MEMBERS/MANAGERS | | | 10. ADDITIONS/CHANGES | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM JENNINGS, GREGORY 25 LAKE AVE WINTER HAVEN, FL 33880 | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM JENNINGS, SHERRIE 25 LAKE AVE WINTER HAVEN, FL 33880 | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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 <u>GREGORY A. JENNINGS</u> | | | 1-15-07 863-295-9979 | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE | | | Date Daytime Phone # | | |



ATTACHMENT
20002444
Division of Corporations

2007 Annual Report

Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the
annual report form.

| | |
|---|--------------|
| This information cannot be changed on the report. | |
| Document Number | L06000058925 |
| Business Entity Name | GAJ, LLC |
| Original File Date | 06/08/2006 |

FEI Number

Principal Address 25 LAKE AVE
WINTER HAVEN, FL 33880

Mailing Address 25 LAKE AVE
WINTER HAVEN, FL 33880

Registered Agent GREGORY JENNINGS
25 LAKE AVE
WINTER HAVEN, FL 33880

Managing Member/Manager Name And Address

MGRM
GREGORY JENNINGS
25 LAKE AVE
WINTER HAVEN, FL 33880

MGRM
SHERRIE JENNINGS
25 LAKE AVE
WINTER HAVEN, FL 33880

GAJ LLC 08-06
25 LAKE AVE.
WINTER HAVEN, FL 33880-4977

1008

Date 1/15/07

63-27/631 FL
1508

Pay to the Order of FLORIDA DEPARTMENT OF STATE \$ 55.00

FIFTY FIVE dollars \$ 55.00 Dollars

Bank of America

ACH R/T 063100277

For #L06000058925

1:063100277: 00229135465711008