


**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
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

	
01052007	Chg-LLC
CR2E083 (12/06)	
4. FEI Number 87-0779774	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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	FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

Filing Fee is \$50.00 Due by May 1, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JENNINGS, GREGORY 25 LAKE AVE WINTER HAVEN, FL 33880 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JENNINGS, SHERRIE 25 LAKE AVE WINTER HAVEN, FL 33880 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

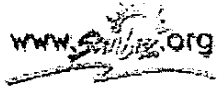
10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 GREGORY A. JENNINGS  **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 XX

FIFTY FIVE dollars \$ 00/100 Dollars

Bank of America

ACH R/T 083100277

For # L06000058925

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