

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000072252

1. Entity Name
JOHNNY D. LEE JR., LLC



Principal Place of Business
3700 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

Mailing Address
3700 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

FILED
Aug 11, 2008 08:00 AM
Secretary of State



08082008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1766671

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEE, JOHNNY D JR.
3700 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

**DO NOT WRITE
IN THIS SPACE**

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

Johnny D. Lee Jr.
Signature, typed or printed name of registered agent and title if applicable.

Johnny D. Lee Jr.
(NOTE: Registered Agent signature required when reinstalling)

8/8/08
DATE

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

000000957568
08/11/08-80005-021 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LEE, JOHNNY D JR.
3700 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LAU, GERALDINE Y
3700 SOUTH ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Johnny D. Lee Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Johnny D. Lee Jr.

8/8/08

Date

Daytime Phone #

386-427-4126