2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000073520

1. Entity Name 207 JAMAICA, LLC



Principal Place of Business

3250 NAVY BLVD. PENSACOLA, FL 32505 Mailing Address

PO BOX 12346 PENSACOLA, FL 32591

FILED Feb 11, 2008 8:00 am Secretary of State

02-11-2008 90136 044 ***138.75

60007231



01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5300528

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BIZZELL, THOMAS 14402 RIVER ROAD PENSACOLA, FL 32507

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

Signature, typed or printed name of registered agent and title if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	BIZZELL, THOMAS
STREET ADDRESS	PO BOX 12346
CITY-ST-ZIP	PENSACOLA, FL 32591
TITLE	MGRM
NAME	BIZZELL, ALLEN
STREET ADDRESS	14161 GORHAM ROAD
CITY-ST-ZIP	PENASCOLA, FL 32507
TITLE	MGRM
NAME	BIZZELL, STEVE
STREET ADDRESS	6804 FABIANO DRIVE
CITY-ST-ZIP	PENSACOLA, FL 32506
TITLE	MGRM
NAME	KING, MARY
STREET ADDRESS	2510 E NINE MILE ROAD
CITY-ST-ZIP	PENSACOLA, FL 32514
TITLE	MGRM
NAME	BIZZELL, ROLAND
STREET ADDRESS	601 DOG TRACK ROAD
CITY-ST-ZIP	PENSACOLA, FL 32506
TITLE	MGRM
NAME	BIZZELL, DAVID
STREET ADDRESS .	16285 NORTH SHORE DRIVE
CITY-ST-ZIP	PENSACOLA, FL 32507
11. I hereby	certify that the information supplied with this filling does not qualify for the ex-

DO NOT WRITE
IN THIS SPACE

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 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

Thomas m. Busce

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Thomas M. Bizzell

7 -1 -09

Daytime Phone #