

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

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

04-11-2008 90175 003 ***138.75

DOCUMENT # L07000004531

1. Entity Name

J & A ASSOCIATES LLC



Principal Place of Business

1311 HIGHWAY 41 NORTH
INVERNESS FL 34450

Mailing Address

1311 HIGHWAY 41 NORTH
INVERNESS FL 34450



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

4. FEI Number

33-1150976

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

1st MOORE

CR2E083 (10/07)

6. Name and Address of Current Registered Agent

BARTLETT, ANDREA KAY
9 N. ROBINHOOD RD.
INVERNESS FL 34450

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

3994 S. Spanish Trail

City

Inverness

FL

Zip Code

34450

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 fee 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
Make Check Payable to Florida Department of State.

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME BARTLETT, ANDREA KAY
STREET ADDRESS 9 N. ROBINHOOD RD.
CITY-ST-ZIP INVERNESS FL 34450

TITLE MGRM ☐ Delete
NAME DEAS, JENNIFER S
STREET ADDRESS 9 N. ROBINHOOD RD.
CITY-ST-ZIP INVERNESS FL 34450

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME 3994 S. Spanish Trail
STREET ADDRESS Inverness Fl. 34450
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME 3994 S. Spanish Trail
STREET ADDRESS Inverness Fl. 34450
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NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

Jennifer Deas

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

Date

4/1/08

Exhibit Page #