

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051231

FILED
Jan 04, 2008
Secretary of State

Entity Name: J & J LUTZ ENTERPRISES L.L.C.

Current Principal Place of Business:

599 MARISOL DRIVE
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

599 MARISOL DRIVE
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LUTZ, KRISTEN
599 MARISOL DRIVE
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

LUTZ, WALTER
599 MARISOL DRIVE
NEW SMYRNA BEACH, FL 32168 US

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.

SIGNATURE: WALTER LUTZ

01/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LUTZ, KRISTEN
Address: 599 MARISOL DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM () Delete
Name: LUTZ, WALTER
Address: 599 MARISOL DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM () Delete
Name: HAYCOOK, HAROLD
Address: 6912 TURTLE MOUND ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LUTZ, WALTER
Address: 599 MARISOL DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM (X) Change () Addition
Name: HAYCOOK, HAROLD
Address: 6912 TURTLE MOUND ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: MGRM (X) Change () Addition
Name: LUTZ, KRISTEN
Address: 599 MARISOL DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: MGRM () Change (X) Addition
Name: HAYCOOK, ANITA
Address: 6912 TURTLE MOUND ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WALTER LUTZ

MGRM

01/04/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date