


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # L32186

1. Entity Name
J & L PROPERTY MANAGEMENT, INC.



Principal Place of Business % J & L PROPERTY MANAGEMENT, INC. 10191 W. SAMPLE ROAD, SUITE 203 CORAL SPRINGS, FL 33065 US	Mailing Address % J & L PROPERTY MANAGEMENT, INC. 10191 W. SAMPLE ROAD, SUITE 203 CORAL SPRINGS, FL 33065 US
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01282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0169778	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CALDERAZZO, LORRAINE
11466 NW 48TH CT
CORAL SPRINGS, FL 33076

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)

000000012794
 02/12/08-80083-017-150.00

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CALDERAZZO, JAMES R. 8801 W. SAMPLE RD. #1 CORAL SPRINGS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST CALDERAZZO, LORRAINE 8801 W. SAMPLE RD. #1 CORAL SPRINGS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALDERAZZO, LORRAINE 8801 W. SAMPLE RD. #1 CORAL SPRINGS, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lorraine Calderazzo*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-08 Date
954-753
7966 ext 110 Daytime Phone #