

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L97000000165

1. Entity Name
J R & P J SIMS, L.L.C.



Principal Place of Business
**9797 ALHAMBRA LANE
BONITA SPRINGS, FL 34135**

Mailing Address
**9797 ALHAMBRA LANE
BONITA SPRINGS, FL 34135**



03212006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3439014

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SIMS, JAMES R
9797 ALHAMBRA LANE
(PO BOX 2387)
BONITA SPRINGS, FL 34133**

**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 _____

Filing Fee is \$50.00
Due by May 1, 2006

000000483232
04/11/06-80110-009 50.00

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM SIMS, JAMES R 9797 ALHAMBRA LANE BONITA SPRINGS, FL 341352387 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM SIMS, PEGGY J 9797 ALHAMBRA LANE BONITA SPRINGS, FL 341352387 |
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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: **JAMES R. SIMS** *James R Sims*

3/22/06 (239) 992-8003