

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L98000002469

1. Entity Name
JEANNE DAILEY COLETTA, LLC



Principal Place of Business
**12815 HIGHWAY 98 WEST
SUITE 100
DESTIN, FL 32550**

Mailing Address
**P.O. BOX 1779
DESTIN, FL 32540**



01062007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3545998	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

**DAILEY, JEANNE
33 BETHANY BAY
DESTIN, FL 32541**

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DAILEY, JEANNE
STREET ADDRESS	33 BETHANY BAY
CITY-ST-ZIP	DESTIN, FL 32541

TITLE	MGRM
NAME	JEANNE DAILEY-COLETTA REVOCABLE TRUST
STREET ADDRESS	33 BETHANY BAY
CITY-ST-ZIP	DESTIN, FL 32541

TITLE	
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02/07/07-80085-007 50.00

**DO NOT WRITE
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 606, Florida Statutes.

SIGNATURE: _____

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

Date

Daytime Phone #