2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000006455

1. Entity Name
JACKSON & RENFROE, LLC



FILED
Jan 23, 2006 08:00 AM
Secretary of State

Principal Place of Business

2550 GARLAND RD NAPLES, FL 34117 Mailing Address

2550 GARLAND RD NAPLES, FL 34117



01192006No Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied For
59-3604325	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RENFROE, EDWARD A 5088 SEASHELL LANE NAPLES, FL 34103

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NAPLES, I	FL 34103	IN T	IN THIS SPACE	
	named entity submits this statement for the purpose of charions of registered agent.	liging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered egent and title if applicable.	(NOTE: Registered Agent signature required when rematiting)	DATE	
	iling Fee is \$50.00 ue by May 1, 2006	r I		
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RENFROE, EDWARD A 5088 SEASHELL AVE NAPLES, PL 34103		1,0nn00399635 02/01/06-80020-006 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JACKSON, DARVIN E 2838 COACH HOUSE WAY NAPLES, FL 34105		02/01/06-80020-006 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
TITLE HAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP				
11. I hereby indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature s ability company or the receiver or trustee empowered to exce	quality for the exemptions contained in Chapter 1 that have the same legal effect as if made under excute this report as required by Chapter 608, Floric	 Florida Statutes. I further certily that the information path; that I am a managing member or manager of the da Statutes. 	