



2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUN 18 AM 8:52

DOCUMENT # M06000002271 1. Entity Name JODY'S, LLC					
Principal Place of Business 124 SOUTH BROAD STREET CAIRO, GA 39828			Mailing Address 124 SOUTH BROAD STREET CAIRO, GA 39828		
2. Principal Place of Business - No P.O. Box # <u>221 Grant Road</u>		3. Mailing Address <u>221 Grant Road</u>		 06072008 Chg-LLC CR2E083 (12/06)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <u>Cairo, GA</u>		City & State <u>Cairo, GA</u>			
Zip Country <u>39828</u> <u>US</u>		Zip Country <u>39828</u> <u>U.S.</u>			
4. FEI Number 20-4504118				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FANNON, BRADLEY P 513 W GAINES ST TALLAHASSEE, FL 32301			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 <u>Joanna Fannon</u> DATE <u>6/1/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$50.00		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FANNON, MICHAEL A <input checked="" type="checkbox"/> Delete 124 SOUTH BROAD STREET CAIRO, GA 39828		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 600131506556 06/19/08--01035--013 **\$0.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FANNON, JOANNA L <input type="checkbox"/> Delete 124 SOUTH BROAD STREET CAIRO, GA 39828		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>221 Grant Road</u> <u>Cairo, GA 39828</u>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition B. Testout JUN 18 2008	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>Joanna Fannon</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<u>6/9/08</u> <u>850 766-0782</u> <small>Date Daytime Phone #</small>		