## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M98000001519

City-St-Zip:

BATON ROUGE, LA 70809

Entity Name: THE JENNINGS FAMILY, L.L.C.

FILED Feb 13, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9243 INTERLINE AVE BATON ROUGE, LA 70809 **Current Mailing Address: New Mailing Address:** 9243 INTERLINE AVE BATON ROUGE, LA 70809 FEI Number: 72-1432357 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR (X) Delete Title: () Change () Addition JENNINGS, ROBERT D Name: Name: Address: 17434 WEST LAKEWAY DRIVE Address: City-St-Zip: BATON ROUGE, LA 70810 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: JENNINGS, PAUL Name: Address: 9243 INTERLINE AVE Address: City-St-Zip: BATON ROUGE, LA 70809 City-St-Zip: Title: MGR () Delete Title: () Change () Addition JENNINGS, CRAIG Name: Name: 9243 INTERLINE AVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

City-St-Zip:

SIGNATURE: PAUL JENNINGS MGR 02/13/2007