


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000003542

1. Entity Name
 AJLM, L.L.C.



Principal Place of Business: 460 HARBOUR ISLAND ROAD, ORLANDO, FL 32809

Mailing Address: 460 HARBOUR ISLAND ROAD, ORLANDO, FL 32809



01132006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3635860 Applied For: Not Applicable

5. Certificate of Status Desired: \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MOCCIO, JOHN
 460 HARBOUR ISLAND ROAD
 ORLANDO, FL 32809

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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: *John Moccio* DATE: 1/13/06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOCCIO, JOHN 460 HARBOUR ISLAND RD. ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOCCIO, REBECCA A 460 HARBOUR ISLAND RD. ORLANDO, FL
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 01/20/06-80004-010 50.00

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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: *[Signature]* DATE: 1/13/06

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