

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 02, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # L01000010921**

1. Entity Name  
**AEJ DEVELOPMENT LLC**



Principal Place of Business  
**C/O JUSTER DEVELOPMENT CO.  
303 SOUTH BROADWAY, STE. 450  
TARRYTOWN, NY 10591-5410**

Mailing Address  
**C/O JUSTER DEVELOPMENT CO.  
303 SOUTH BROADWAY, STE. 450  
TARRYTOWN, NY 10591-5410**



04242007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**13-4180743**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**UNITED CORPORATE SERVICES, INC.  
9200 S. DADELAND BLVD., STE. 508  
MIAMI, FL 33156**

**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**

U00000757830  
05/23/07-80090-010 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
JUSTER, ANN E  
303 S BROADWAY SUITE 450  
TARRYTOWN, NY 10591**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGRM  
AEJ MANAGEMENT CORP  
303 S BROADWAY SUITE 450  
TARRYTOWN, NY 10591**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
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CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**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 608, Florida Statutes.

**SIGNATURE:** *Ann E Juster*

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

*Ann E Juster* 4/27/07 (914) 524-7700

Date

Daytime Phone #