


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000010921	
1. Entity Name AEJ DEVELOPMENT LLC	

**FILED**  
**Aug 21, 2008 08:00 AM**  
**Secretary of State**

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
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08062008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 13-4180743	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent  UNITED CORPORATE SERVICES, INC. 9200 S. DADELAND BLVD., STE. 508 MIAMI, FL 33156
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**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

**FILE NOW!!! FEE IS \$138.75  
Due by September 12, 2008**

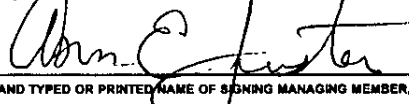
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U000000958115  
08/21/08-80004-009 138.75

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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:**  Ann E Juster 8/15/08 (914) 524-7700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #