

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000047467

**Entity Name:** MSBJS PROPERTIES, LLC

**Current Principal Place of Business:**

208 S. 3RD STREET  
FLAGLER BEACH, FL 32136

**Current Mailing Address:**

P. O. BOX 550  
BUNNELL, FL 32110

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BAYER, DENNIS K ESQ  
109 SOUTH 6TH STREET  
FLAGLER BEACH, FL 32136 US

*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

**Authorized Person(s) Detail :**

|                 |                    |                 |                      |
|-----------------|--------------------|-----------------|----------------------|
| Title           | MGRM               | Title           | MGRM                 |
| Name            | STRICKLAND, MARVIN | Name            | STRICKLAND, BETTY JO |
| Address         | P. O. BOX 550      | Address         | P. O. BOX 550        |
| City-State-Zip: | BUNNELL FL 32110   | City-State-Zip: | BUNNELL FL 32110     |

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BETTY JO STRICKLAND

MGRM

02/17/2014

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date