## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# J50100

Entity Name: LRJS, INC.

FILED Feb 12, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	STREET NO SBURG, FL				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	STREET NO SBURG, FL				
FEI Number:	59-2742905	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:	
KRAMER, I 194 EAST ( PALM HAR		84 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.					
SIGNATUR	RE:				
	Electror	nic Signature of Registered Agent		Date	
Election Carr	paign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) HEARN, JAMES 3519 LANDMAI PALM HARBOR	RK PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DST ( ) KRAMER, RAM 194 E. CANAL PALM HARBOR	DR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DVP ( ) GERMAIN, MIC 5802 98TH AVE PINELLAS PAR	≣ N	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LUCAS, SCOT 4690 49 ST N	Delete F BURG, FL 33709	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) HERMAN, JENI 2829 COBBLEI PALM HARBOR	R DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL GERMAIN OFFI 02/12/2009