


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Feb 02, 2007 08:00 AM
Secretary of State**

DOCUMENT # L00000005719 1. Entity Name TJR DEVELOPMENT, LLC	
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Principal Place of Business 1915 WEST CLINTON DRIVE ST CLOUD, FL 34769	Mailing Address 1915 WEST CLINTON DRIVE ST CLOUD, FL 34769
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DO NOT WRITE IN THIS SPACE



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3664191	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CLEMENTS, ROBERT G 5728 MAJOR BLVD. STE. 270 ORLANDO, FL 32801
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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

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RICHTMYER, THOMAS J SR 1915 W. CLINTON DR. ST. CLOUD, FL 34769
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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date 407-957-6228 Daytime Phone #