2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L0000013825

1. Entity Name
DAJ'S PROPERTY MANAGEMENT, L.L.C.



FILED ... May 01, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

3225 S MACDILL AVE STE 129-258 TAMPA, FL 33629 3225 S MACDILL AVE STE 129-258 TAMPA, FL 33629



04082008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number 59-3682493	•	F	Applied For Not Applicable
5.	Certificate of Status Desired		\$5.00 Fee Re	Additional

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

NEUKAMM, JOHN B 305 S. BLVD. TAMPA, FL 33606

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.
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(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

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9.			
TITLE	MGR		
NAME	JOHNSON, DEBRA A		
STREET ADDRESS			
CITY-ST-ZIP	TAMPA, FL 33629		
TIFLE	MGR		
NAME	JOHNSON, DAVID A		
STREET ADDRESS	3225 S MACDILL AVE STE 129-258		
CITY-ST-ZIP	TAMPA, FL 33629		
TITLE			
NAME			
STREET ADDRESS			
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CITY-ST-ZIP			

U00000938467 05/27/08-80091-014 138.75

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 of 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

4/28/08 (813) 334-838