2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

3

FILED
Apr 05, 2004 8:00 am
Secretary of State
03-23-2004 90069 031 ****50.00

DOCUMENT # L00000014437

1. Entity Name
R.M.J.T.J., L.L.C.

Principal Place of Business	Mailing Address
1320 LANCEWOOD TERRACE PALM CITY, FL 34990	1320 LANCEWOOD TERRACE PALM CITY, FL 34990

03172004No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-6350286
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

RIFKIN, AVRIAN
800 SE MONTERY COMMONS BLVD
#200
STUART, FL 34996

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
TITLE	~~PRES~~ MANAGING MEMBER
NAME	CAMPION, MARGUERITE S
STREET ADDRESS	1320 LANCEWOOD TERRACE
CITY-ST-ZIP	PALM CITY, FL 34990
TITLE	S T
NAME	~~CAMPION, RUSSELL R~~ MSC
STREET ADDRESS	~~1320 LANCEWOOD TERRACE~~
CITY-ST-ZIP	~~PALM CITY, FL 34990~~
TITLE	MEM
NAME	~~WALKER, JILL C~~ MSC
STREET ADDRESS	~~3494 SW ASPEN PL.~~
CITY-ST-ZIP	~~PALM CITY, FL 34990~~
TITLE	MEM
NAME	~~CAMPION, THOMAS R~~ MSC
STREET ADDRESS	~~9480 HIGHWOOD HILL RD.~~
CITY-ST-ZIP	~~BRENTWOOD, TN 37027~~
TITLE	MEM
NAME	~~CAMPION, JON W~~ MSC
STREET ADDRESS	~~9226 FOX RUN DRIVE~~ 4515 SW LAPARONIA DR
CITY-ST-ZIP	~~BRENTWOOD, TN 37027~~ PALM CITY, FL 34990
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Marguerite S. Campion 3/17/04 772-221-3990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #