

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000003458

1. Entity Name

T. J. INVESTMENTS - PORT CHARLOTTE, LLC



Mailing Address

Principal Place of Business 1230 S MYRTLE AVE SUITE 301

SUITE 301 CLEARWATER, FL 33756 P.O. BOX 671 CLEARWATER, FL 33757

FILED Apr 27, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01042005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3704102

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

PRATESI, EMIL G 1253 PARK ST CLEARWATER, FL 33756

CMY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char tions of registered agent.	iging its registered office or registered agent, or both, in the State of F	lorida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or proted name of registered agent and trite if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE A	
	iling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMPSON, ROBERT M JR 1230 S. MYRTLE AVE., #301 CLEARWATER, FL 33756			
TITLE ' NAME STREET ADDRESS CITY-ST-ZIP	VP THOMPSON, R.M. CO. 1230 S. MYRTLE AVE., #301 CLEARWATER, FL 33756	04/27/09	10336963 -80146-001 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JUENGLING, CHARLES 1230 S. MYRTLE AVE., #301 CLEARWATER, FL 33756	V TON OC	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS				

11. I hereby certify that the information supplied with this filling 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.

ROBERT M. THOMPSON, JR.

URE:

4/10/05

--727-446-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #