

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

9/2/2004-90005-011-\$50.00-\$50.00

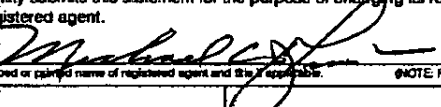
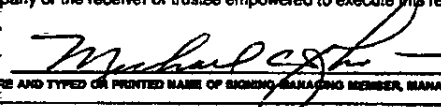
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2004 OCT 12 P 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08252004 Chg-LLC CR2E083 (10/03)

DOCUMENT # L01000007189			
1. Entity Name MAJIC PROPERTIES, LC			
Principal Place of Business 370 15TH ST S JACKSONVILLE BEACH, FL 32250		Mailing Address 370 15TH ST S JACKSONVILLE BEACH, FL 32250	
2. Principal Place of Business 370 15TH AVENUE SOUTH Suite, Apt. #, etc. SUITE A City & State JACKSONVILLE BEACH FL Zip 32250 Country USA		3. Mailing Address 370 15TH AVENUE SOUTH Suite, Apt. #, etc. SUITE A City & State JACKSONVILLE BEACH FL Zip 32250 Country USA	
4. FEI Number 59-3718949		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent JOHNSTON, MICHAEL A 370 15TH ST S JACKSONVILLE BEACH, FL 32250		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 the applicable (NOTE: Registered Agent signature required when reinstating)		DATE 8-30-2004	
Filing Fee is \$50.00 Due by September 8, 2004		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOHNSTON, MICHAEL A 370 15TH ST S JACKSONVILLE BEACH, FL 32250 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOHNSTON, MICHAEL A 370 15TH AVENUE SOUTH JACKSONVILLE BEACH FL 32250 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FARRELL FLEMING 26 COUNTRY CLUB DRIVE PORT WASHINGTON NY 11050 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOHN FONTANA 48 HARD STREET HARTINGTON CT 06484 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DAVID JOHNSTON 60 LAUREL STREET FLORAL PARK N.Y. 11001 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TIMOTHY P. KING 136 INDIAN HAMMOCK LANE PONTE VEDRA BEACH, FL 32082 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE 8-30-2004 904-4351040 Daytime Phone #	