2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000003262

1. Entity Name

P & J PROPERTIES OF ORLANDO, L.L.C.



FILED Jan 30, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

11422 SATELLITE BLVD ORLANDO, FL 32837 835 ALABAMA WOODS LANE Orlando, FL 32824



DO NOT WRITE IN THIS SPACE

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

Haber

Pamela

5. Certificate of Status Desired

04-3614570

Not Applicable

\$5.00 Additional

407-857-3232

Daviline Phone #

6. Name and Address of Current Registered Agent

HABER, PAMELA L 835 ALABAMA WOODS LANE ORLANDO, FL 32824

the obligations of registered agent.

SIGNATURE:

DO NOT WRITE IN THIS SPACE

| SIGNATURE_ | Signature, typed or printed name of registered agent and title if applicable. | (NOTE: Registered Agent signature required when reinstating) | DATE |
|--|---|--|------------------------------|
| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TITLE | MGR | | |
| NAME | HABER, PAMELA L | | |
| STREET ADDRESS | 835 ALABAMA WOODS LANE | | |
| CITY-ST-ZIP | ORLANDO, FL 32824 | | • |
| TITLE | | | U00000804547 |
| NAME | | | 02/05/08-80073-011 138.75 |
| STREET ADDRESS | | | 0E/ 00/ 00 000 0 011 100. 0 |
| CITY-ST-ZIP | | 1 | |
| TITLE | | | |
| NAME | | | |
| STREET ADDRESS | | 1 50 | NOT MOITE |
| CITY-ST-ZIP | | טע ן | NOT WRITE |
| TILE | | The last | THIS SDACE |
| NAME | | 1 118 | THIS SPACE |
| STREET ADDRESS | | | • |
| CITY-ST-ZIP | | | |
| TITLE | | | |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| TITLE | | • | |
| NAME | | | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
| 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. | | | |

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