2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000006022

1. Entity Name
BTJM HOLDINGS, LLC

Principal Place of Business	Mailing Address
4160 SALTWATER BLVD. TAMPA, FL 33615	4160 SALTWATER BLVD. TAMPA, FL 33615

DO NOT WRITE IN THIS SPACE

04292004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
27-0006926	Not Applicable

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

6. Name and Address of Current Registered Agent

HOLCOMB, VICTOR W
106 S. TAMPANIA AVENUE, SUITE 200
TAMPA, FL 33609

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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 title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	TEAGLE, BILLY
STREET ADDRESS	4160 SALTWATER BLVD
CITY-ST-ZIP	TAMPA, FL 33615
TITLE	MGRM
NAME	MURPHY, JOE
STREET ADDRESS	743 SAMANTHA DRIVE
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/04/04-80017-016 50.00

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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: _____ JOE MURPHY 4/30/04 813/806-9604 x104
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #