

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007265

Entity Name: D&J PROPERTIES, LLC

FILED
Mar 02, 2005
Secretary of State

Current Principal Place of Business:

3502 HENDERSON BLVD., SUITE 300
TAMPA, FL 33609

New Principal Place of Business:

4830 W. KENNEDY BLVD.
SUITE 695
TAMPA, FL 33609 US

Current Mailing Address:

3502 HENDERSON BLVD., SUITE 300
TAMPA, FL 33609

New Mailing Address:

4830 W. KENNEDY BLVD.
695
TAMPA, FL 33609 US

FEI Number: 04-3634819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFE, RANDOLPH J
100 NORTH TAMPA STREET, SUITE 2700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PULS, BRANDIE L
Address: 3502 HENDERSON BLVD., SUITE 300
City-St-Zip: TAMPA, FL 33609

Title: MGRM () Delete
Name: PULS, JOHN L
Address: 3502 HENDERSON BLVD, SUITE 300
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PULS, BRANDIE L
Address: 4830 W. KENNEDY BLVD., SUITE 695
City-St-Zip: TAMPA, FL 33609 US

Title: MGRM (X) Change () Addition
Name: PULS, JOHN L
Address: 4830 W. KENNEDY BLVD., SUITE 695
City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: BRANDIE L. PULS

MGR

03/02/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date