

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 05, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000018493 1. Entity Name JIM'S STUFF, LLC	
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Principal Place of Business 2229 NEEDLE PALM DR EDGEWATER, FL 32141	Mailing Address 2229 NEEDLE PALM DR EDGEWATER, FL 32141
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DO NOT WRITE IN THIS SPACE



01112005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 22-3860909	Applied For Not Applicable
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5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent MARSHALL, JAMES 2229 NEEDLE PALM DR EDGEWATER, FL 32141
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

1100000216633
02/05/05-80057-006 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARSHALL, JAMES 2229 NEEDLE PALM DR EDGEWATER, FL 32141
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IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE:  **1-1-05 386-408-0418**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #