

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021623

FILED  
Jul 08, 2005  
Secretary of State

Entity Name: JMJ CAPE 7520 LLC

## Current Principal Place of Business:

7520 RIDGEWAY AVE  
101  
CAPE CANAVERAL, FL 32930

## New Principal Place of Business:

## Current Mailing Address:

667 CLIFFSIDE DR.  
SAN DIMAS, CA 91773

## New Mailing Address:

201A FICK FARM ROAD  
CHESTERFIELD, MO 63005

FEI Number: 55-0792811      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 US

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/MANAGERS:

Title: MGR ( ) Delete  
Name: GRASSO, JOHN L  
Address: 2677 HOLLY DRIVE  
City-St-Zip: UPLAND, CA 91784

Title: MGR ( ) Delete  
Name: GRASSO, MINA  
Address: 2677 HOLLY DRIVE  
City-St-Zip: UPLAND, CA 91784

Title: MGR ( ) Delete  
Name: GRASSO, MICHAEL  
Address: 226 FICK FARM ROAD  
City-St-Zip: CHESTERFIELD, MO 63005

Title: MGR ( ) Delete  
Name: GRASSO, CINDY  
Address: 226 FICK FARM ROAD  
City-St-Zip: CHESTERFIELD, MO 63005

Title: MGR ( ) Delete  
Name: GRASSO, JAMES  
Address: 201 FICK FARMS RD  
City-St-Zip: CHESTERFIELD, MO 63005

Title: MGR ( ) Delete  
Name: GRASSO, KIM  
Address: 201 FICK FARMS RD  
City-St-Zip: CHESTERFIELD, MO 63005

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KIM GRASSO

MGR

07/08/2005

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