

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022206

Entity Name: CJ AND TJ, LLC

FILED  
Mar 03, 2006  
Secretary of State

**Current Principal Place of Business:**

861 EAST SEMORAN BLVD.  
CASSELBERRY, FL 32707

**New Principal Place of Business:**

**Current Mailing Address:**

211 N. MAGNOLIA AVENUE  
C/O YERGEY & YERGEY  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 52-2369066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

YERGEY, DAVID A JR.  
211 N. MAGNOLIA AVENUE  
ORLANDO, FL 32801 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/MANAGERS:**

Title: MGR ( ) Delete  
Name: ALCORN, CANDACE J  
Address: 1095 E. KERWOOD CIRCLE  
City-St-Zip: OVIEDO, FL 32765

Title: MGR ( ) Delete  
Name: LONCHARICH, TIMOTHY J  
Address: 1095 E. KERWOOD CIRCLE  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES:**

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 Chapter 119, 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: TIMOTHY J LONCHARICH

MGR

03/03/2006

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