2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000026604

1. Entity Name

J & M PROPERTIES, LLC

Principal Place of Business

Mailing Address

2711 TAMPA ROAD PALM HARBOR, FL 34684 2711 TAMPA ROAD PALM HARBOR, FL 34684

FILED Mar 23, 2004 8:00 am Secretary of State

03-23-2004 90069 026 ****50.00

2402/663



03152004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 57-1167048

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DRIS, MICHAEL E ESQ 2469 ENTERPRISE ROAD CLEARWATER, FL 33763

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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			
Signature, typed of printed frame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating).			
Filing Fee is \$50.00 Due by May 1, 2004			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PIKOS, MICHAEL 1235 N FLORIDA AVE TARPON SPRINGS, FL 34689		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM TANAPANI, JOHN 22 SPRING BLVD N TARPON SPRINGS, FL 34687		
NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		uplifular the examption stated in Section 110 07/2Vi). Floride Statutes Unitary certify that the inform	

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: Michael Blos Michael Blos 3.15.04 227-937-72)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Date