


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90204 011 ****50.00


1. Entity Name RJV ENTERPRISES OF SRQ, L.L.C.	L03000013514	
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Principal Place of Business C/O JOHN A. MORAN 22 SOUTH LINKS AVE., STE. 300 SARASOTA, FL 34236	Mailing Address C/O JOHN A. MORAN 22 SOUTH LINKS AVE., STE. 300 SARASOTA, FL 34236
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2. Principal Place of Business C/O John Moran 1990 Main Street Suite, Apt. #, etc. Suite 700	3. Mailing Address P. O. Box 3948 Suite, Apt. #, etc.
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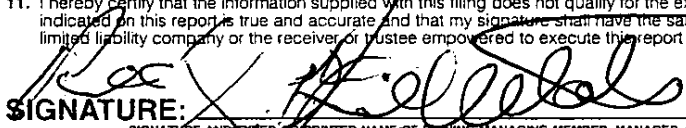
City & State Sarasota	City & State Sarasota	4. FEI Number 04-3754721	Applied For <input type="checkbox"/> Not Applicable
Zip 34236	Country U.S.	Zip 34230	Country U.S.

6. Name and Address of Current Registered Agent MORAN, JOHN A C/O DUNLAP & MORAN, PA 22 SOUTH LINKS AVE., STE. 300 SARASOTA, FL 34236	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1990 Main Street, Suite 700 City Sarasota FL Zip Code 34236
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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 	DATE 3/8/05
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Filing Fee is \$50.00 Due by May 1, 2005	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VITALE, RICHARD J 22 SOUTH LINKS AVE., STE. 300 SARASOTA, FL 34236 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	1990 Main Street, Suite 700 Sarasota, FL 34236 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:  Richard J. Vitale	Manager 941/366-0115