## 2007 LIMITED LIABILITY COMPANY

## FILED **ANNUAL REPORT** Feb 08, 2007 08:00 A Secretary of State DOCUMENT # L03000025925 1. Entity Name VJS HOLDINGS, LLC Mailing Address Principal Place of Business P.O. BOX 417 2317 NORTH DOVER ROAD SYDNEY, FL 33587 **DOVER, FL 33527** 01032007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0103431 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NORMAN, CHRISTOPHER H DO NOT WRITE 315 S. HYDE PARK AVENUE TAMPA, FL 33606 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. Signature, typed or printed name of registered agent and little diapplicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 44. y. 11 MANAGING MEMBERS/MANAGERS 9. TITLE MGR SCHAFFER, MARY V NAME STREET ADDRESS 5961 HARVEY TEW ROAD U00000627620 02/15/07-80065-024 50.00 CITY-ST-ZIP PLANT CITY, FL 33565 MGR TITLE MALLARD, MARIE J NAME STREET ADDRESS P.O. BOX 401 CITY-ST-ZIP DURANT, FL 33530 TSTLE MGR FISHER, MARTHA S NAME STREET ADDRESS P.O. BOX 417 DO NOT WRITE SYDNEY, FL 33587 CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 it 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.

CITY-ST-ZIP -TITLE NAME STREET ADDRESS CITY-ST-ZIP