

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000031106

1. Entity Name  
RBJ PROPERTIES, LLC



Principal Place of Business  
2102 SW 20TH PLACE - SUITE #303  
OCALA, FL 34474

Mailing Address  
PO BOX 6978  
OCALA, FL 34478



03212005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
54-2121666

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

EHLERS, BRIAN E  
1803 SE 85TH STREET ROAD  
OCALA, FL 34480

**DO NOT WRITE  
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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

1100000346471  
04/30/05-80076-010 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
EHLERS, BRIAN E  
1803 S.E. 85TH STREET ROAD  
OCALA, FL 34480

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
FINK, JAMES J  
2441 S.E. 38TH STREET  
OCALA, FL 34480

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
FINK, ROLAND R  
5121 S.E. 38TH STREET  
OCALA, FL 34480

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:** Brian Ehlers Brian E. Ehlers

4-26-05/352-861-4333

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

Date

Daytime Phone #