## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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DOCUMENT # L04000037719

1. Entity Name LJ PROPERTY INVESTMENTS, LLC

**FILED** Mar 27, 2006 08:00 AM **Secretary of State** 

Principal Place of Business

**2623 WATKINS DRIVE** MELBOURNE, FL 32901

Mailing Address

**2623 WATKINS DRIVE** 

MELBOURNE, FL 32901

03242006No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

COLEMAN, CHRISTOPHER J ESQUIRE 1329 BEDFORD DRIVE SUITE 1

MELBOURNE, FL 32940

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8.	. The above named entity submits this statement for the obligations of registered agent.	e purpose of changing its registered office o	r registered agent, or both, in the State of Flo	rida. I am femiliar with, and accept
Si	GNATURE			

(NOTE, Registered Agent argnature required when reinstating)

Filing Fee is \$50.00 Bue by May 1, 2006

U	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS DITY-ST-ZIP	MGRM RADCLIFF, LESLIE J 2623 WATKINS DRIVE MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CHY-ST-ZP	
TITLE NAME STREET ADDRESS CITY-ST-27P	
TITLE HASKE STREET ADDRESS CITY-ST-ZIP	

DATE

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11. I hereby certify that the information supplied with this filling 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 if made under oath; that I am a managing member or manager of the limited dability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

INTEU NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE