## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000042582

Entity Name: SJ3 LLC

FILED Mar 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

135 JOAN PL 2200 CORPORATE BLVD NW

INDIALANTIC, FL 32903 US 401

BOCA RATON, FL 33431

ADDITIONS/CHANGES:

MGR

(X) Change ( ) Addition

(X) Change ( ) Addition

CACCIATORE, JASON D

CACCIATORE, JULIE J

3280 DELRAY BAY DR #107

DELRAY BEACH, FL 33483

3280 DELRAY BAY DR. #107

DELRAY BEACH, FL 33483

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Current Mailing Address: New Mailing Address:

2430 WELLINGTON GREEN DR. 3280 DELRAY BAY DR

WELLINGTON, FL 33414 US DELRAY BEACH, FL 33483

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CACCIATORE, JASON D CACCIATORE, JASON D OWNER

2430 WELLINGTON GREEN DR. 3280 DELRAY BAY DR

WELLINGTON, FL 33414 US DELRAY BEACH, FL 33483 US

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.

SIGNATURE: JASON D. CACCIATORE 03/03/2006

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CACCIATORE, JASON D

Address: 2430 WELLINGTON GREEN DR. 107

City-St-Zip: WELLINGTON, FL 33414

 Title:
 MGR
 ( ) Delete

 Name:
 MAZELOW, SHANAN

 Address:
 2917 ANCHOR DR

City-St-Zip: ORMOND BEACH, FL 32176

Title: ( ) Delete Title: MGR ( ) Change (X) Addition

Name:Name:MAZELOW, SHANANAddress:Address:7 SURFSIDE DR

City-St-Zip: City-St-Zip: ORMOND BEACH, FL 32176

Title: ( ) Delete Title: MGR ( ) Change (X) Addition

Name: MAZELOW, JOCELYN
Address: 7 SURFSIDE DR

City-St-Zip: City-St-Zip: ORMOND BEACH, FL 32176

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JASON D. CACCIARORE MGR 03/03/2006