

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043513

FILED
May 04, 2005
Secretary of State

Entity Name: A.J. ROBINSON ASSOCIATES, LLC

Current Principal Place of Business:

1154 NW 184 TERRACE
PEMBROKE PINES, FL 33029 US

New Principal Place of Business:

Current Mailing Address:

1154 NW 184 TERRACE
PEMBROKE PINES, FL 33029 US

New Mailing Address:

FEI Number: 20-1249417 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ROBINSON, ALVIN L
1154 NW 184 TERRACE
PEMBROKE PINES, FL 33029 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ROBINSON, ALVIN L
Address: 1154 NW 184 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: ROBINSON, JANE
Address: 1154 NW 184 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALVIN L ROBINSON

MGRM

05/04/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date