## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000051336

Entity Name: SBAJ, LLC

FILED Jan 17, 2009 Secretary of State

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

13 FALCONWOOD COURT 4762 CRESTWICKE DRIVE FORT MYERS, FL 33919 LAKELAND, FL 33801

Current Mailing Address: New Mailing Address:

13 FALCONWOOD COURT 4762 CRESTWICKE DRIVE FORT MYERS, FL 33919 LAKELAND, FL 33801

FEI Number: 75-3047088 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SCHOENFELD, LOWELL S BALL, PAULA S

1520 ROYAL PÁLM SQUARE BLVD., SUITE 320 4762 CRESTWICKE DRIVE FORT MYERS, FL 33919 US 4762 CRESTWICKE DRIVE LAKELAND, FL 33801 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: PAULA S. BALL 01/17/2009

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 HARRISON, STEVEN A
 Name:
 BALL, PAULA S

 Address:
 13 FALCONWOOD COURT
 Address:
 4762 CRESTWICKE DRIVE

Address: 13 FALCONWOOD COOK1 Address: 4762 CRESTWICKE DRIVE
City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: LAKELAND, FL 33801

Title: ( ) Delete Title: MGRM ( ) Change (X) Addition Name: MYERS, JACK R

 Name.
 MTERS, JACK R

 Address:
 304 EAST PARK STREET

 City-St-Zip:
 City-St-Zip:
 AUBURNDALE, FL 33823

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

 Name:
 Name:
 BELL, MARION T JR

 Address:
 Address:
 4425 U. S. HWY 92 EAST

 City-St-Zip:
 City-St-Zip:
 LAKELAND, FL 33801

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

 Name:
 Name:
 CHRISTIAN, CECIL B

 Address:
 Address:
 304 EAST PARK STREET

 City-St-Zip:
 City-St-Zip:
 AUBURNDALE, FL 33823

I hereby certify that the information supplied with this filing does not qualify 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: PAULA S. BALL MMMS 01/17/2009