2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000052111

1. Entity Name

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

R. J. VICTOR BUILDING, LLC

Principal Place of Business

360 12TH AVENUE SOUTH NAPLES, FL 34102

360 12TH AVENUE SOUTH NAPLES, FL 34102

Mailing Address

FILED Mar 17, 2008 08:00 A Secretary of State



02142008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number		Applied For
	29-8480061		Not Applicable
5.	Certificate of Status Desired	\$5.00	Additional ouired

6. Name and Address of Current Registered Agent

VICTORSMITH, JENNIFERHELYNE 360 12TH AVENUE SOUTH NAPLES, FL 34102

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	named entity submits this statement for the purpose of char ions of registered agent	nging its registered office or registered agent, or both	n. In the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agen) signature required when (existating)	DATE
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VICTORSMITH, JENNIFERHELYNE 360 12TH AVENUE SOUTH NAPLES, FL. 34102		
TITLE NAME STREET ADDRESS CITY-S1-ZIP			000000861705 04/03/08-80018-025 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE			

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 similar liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

3/14/08

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