


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000065133 1. Entity Name MOJO'S BACKYARD, LLC	
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Principal Place of Business 2595 CENTERVILLE RD TALLAHASSEE, FL 32308 US	Mailing Address 427 BEAVER LAKE RD TALLAHASSEE, FL 32312 US
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DO NOT WRITE IN THIS SPACE

FILED
08 APR 24 AM 8:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04222008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1566521	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

**JONES, DAWN K
427 BEAVER LAKE RD
TALLAHASSEE, FL 32312**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**


9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JONES, DAWN K 427 BEAVER LAKE RD TALLAHASSEE, FL 32312
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04/24/08--01031--011 **138.75

**DO NOT WRITE
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11. I hereby certify that the information supplied with this filing 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **4/10/08 850.422-3003**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #