FILED May 23, 2005 8:00 am Secretary of State 04-25-2005 90103 008 ****50.00

2005 LIMITED LIABILITY COMFANY ANNUAL REPORT (AR)

•		**************************************		7.1.1				04-23-2003	70105	.00	30.00
DOCUMENT # L04000078760 1. Entity Name											
LJ PROPERTIES, LLC									31) (1	0707	ı A
Principal Place	e of Business			٦		9 ((1)	0101	4			
2746 MILLSTONE PLANTATION ROAD 274 TALLAHASSEE FL 32312 TAL				2746 MILLSTONE PLANTATION ROAD TALLAHASSEE FL 32312			1				
2. Principal Place of Business				3. Mailing Address				19 Briets dift Baren ei Øtt Oezit døte	1 82% ATUS (3257)	TITI IRECT CINE CI	rifer, m errif
Suite, Apl. #, etc.			Suite, Apt. #, etc.					1st MOORE	CR2E08:	3 (10/04)	·_ ·
City & State			City & State				4. FEI Nun	-1821490	·		oplied For ot Applicable
Zip	Country			<u> </u>		,	Certificate of Status Desired Name and Address of New Register			Fee Required	
6. Name and Address of Current Registered Agent						Name	7. Name a	nd Address of New F	Registered #	gent	
HARTUNG, LAURIE J 2746 MILLSTONE PLANTATION TALLAHASSEE FL 32312				D	Street Address (P.O. Box Number Is Not Acceptable)						
IALLAHASSEE FL 32312											
						City			FL	Zip Cod	le
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. Fam familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or prated name to legislated agent and bits if applicable (NOTE Registered Agent signature required when reinstailing) DATE											
FILE NOW!!! FEE IS \$50.00											
Make Check Payable to Florida Department of State Due By May 1, 2005											
9.		MANAGING MEMBE			ADDITIONS	/CHANGES					
TITLE NAME	Manazina Meatre Delete III Laurie J. Hartang Rd. SS 2746 Millstone Plantation Rd.							·		☐ Change	Addition
STREET ADDRESS CITY-S1-ZIP	R.L.	STRE	ETADORESS -ST-ZIP								
TITLE				☐ Delete	TITL					☐ Change	☐ Addition
NAME STREET ADDRESS					NAM STRE	ET ADORESS				•	
CITY-ST-ZIP					aly	-S1-2P					<u>. </u>
TITLE						,			· -	☐ Change	Addition
STREET ADDRESS	-	STR	EET ADDRESS								
CITY-ST-ZIP					ату	-S1-7P					
TITLE				Defete	វាវាប					☐ Change	Addition
NAME STREET ADDRESS	}				NAM	ET ADDRESS					
CITY-ST-ZIP					CITY	-S1-ZIP					
IIILE NAME				☐ Delete	TITLE	I				Change	Addition
STREET ADDRESS	ļ				SIRE	SZERODA 13					
CITY-ST-ZIP	 -			☐ Deleta	THIL	f - \$1-ZIP				Change	Add:Jon
NAME	}			<i>0</i> 0000	NAM	ιε]				CT Asserted	C) Mondal
STREET ADDRESS CITY-ST-ZIP				·	CITY	EI ADDRESS					
11. I hereby certify that the information supplied with this filling does not qualify 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 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: Laurie J. Hartung 4-19-05 (850) 893-1792											
SIGNAL		TYPED OR PRINTED NAME OF	F SIGNANG	MANAGING MEMBER, MA	NAGER, OF	AUTHORIZED REPRE	BENTATIVE	Dave	0.	rytema Phone #	']