

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000004014

FILED
Apr 29, 2009
Secretary of State

Entity Name: SJRS & K, LLC

Current Principal Place of Business:

3300 COASTAL HIGHWAY
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

403 GENERAL HARDEE SQUARE
PEACHTREE CITY, GA 30269 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTLETT, BARON L ESQ
BARTLETT & DEAL, P.A.
135 PROFESSIONAL DRIVE, SUITE 101
PONTE VEDRA BEACH, FL 32082 US

Name and Address of New Registered Agent:

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/MANAGERS:

Title: MGRM () Delete
Name: KOVAL, STEPHANIE S
Address: 3300 COASTAL HWY
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: MGRM () Delete
Name: KOVAL, ROBERT A
Address: 403 GENERAL HARDEE SQ.
City-St-Zip: PEACHTREE CITY, GA 30269

Title: MGRM () Delete
Name: SCHWECKERT, JAMES P
Address: 2208 101ST AVE SW
City-St-Zip: OLYMPIA, WA 98512

ADDITIONS/CHANGES:

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

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

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

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: STEPHANIE S. KOVAL

MGRM

04/29/2009

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