

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000009750

Entity Name: J & J DISTINCTIVE INVESTMENTS, LLC

FILED  
Apr 25, 2006  
Secretary of State

**Current Principal Place of Business:**

12571 EAGLE POINTE CIRCLE  
FT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

12571 EAGLE POINTE CIRCLE  
FT MYERS, FL 33913

**New Mailing Address:**

FEI Number: 02-0775456

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JURSINSKI, KEVIN F ESQ  
7800 UNIVESRITY POINTE DR SUITE 200  
FT MYERS, FL 33907 US

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

STILSON, JOHN J  
12571 EAGLE POINTE CIRCLE  
FT MYERS, FL 33913 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: JOHN J. STILSON

04/25/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: DIPOCE, JOHN  
Address: 7800 UNIVERSITY POINTE DRIVE SUITE 200  
City-St-Zip: FORT MYERS, FL 33907 US

Title: MGRM ( ) Change (X) Addition  
Name: STILSON, JOHN J  
Address: 12571 EAGLE POINTE CIRCLE  
City-St-Zip: FORT MYERS, FL 33913 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN J. STILSON

MGRM

04/25/2006

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