

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019399

Entity Name: MJSJ UNITED LLC

FILED  
Apr 21, 2009  
Secretary of State

## Current Principal Place of Business:

6111 BROKEN SOUND PARKWAY NW, SUITE 350  
BOCA RATON, FL 33487

## New Principal Place of Business:

6111 BROKEN SOUND PKWY NW  
SUITE 350  
BOCA RATON, FL 33487

## Current Mailing Address:

6111 BROKEN SOUND PARKWAY NW, SUITE 350  
BOCA RATON, FL 33487

## New Mailing Address:

6111 BROKEN SOUND PKWY NW  
SUITE 350  
BOCA RATON, FL 33487

FEI Number: 20-2459644

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CROWE, MELISSA  
6111 BROKEN SOUND PKWY, NW STE 350  
BOCA RATON, FL 33487 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: SCHMIER, JEFFREY L  
Address: 6111 BROKEN SOUND PKWY NW, STE 350  
City-St-Zip: BOCA RATON, FL 33487

Title: MGR ( ) Delete  
Name: SCHMIER, JASON  
Address: 6111 BROKEN SOUND PKWY NW, STE 350  
City-St-Zip: BOCA RATON, FL 33487

Title: MGR ( ) Delete  
Name: SCHMIER, STEPHEN  
Address: 6111 BROKEN SOUND PKWY NW, STE 350  
City-St-Zip: BOCA RATON, FL 33487

Title: MGR ( ) Delete  
Name: CROWE, MELISSA  
Address: 6111 BROKEN SOUND PKWY, STE 350  
City-St-Zip: BOCA RATON, FL 33487

## 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:

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: JEFFREY SCHMIER

MGRM

04/21/2009

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