

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000024746

FILED
Mar 30, 2007
Secretary of State**Entity Name:** POJ TERRITORIES, L.C.**Current Principal Place of Business:**17833 MURDOCK CIR
PORT CHARLOTTE, FL 33948**New Principal Place of Business:****Current Mailing Address:**17833 MURDOCK CIR
PORT CHARLOTTE, FL 33948**New Mailing Address:****FEI Number:** 65-1246349**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SELLEY, CLAY O
17833 MURDOCK CIR
PORT CHARLOTTE, FL 33948 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: SELLEY, CLAY O
Address: 17833 MURDOCK CIR
City-St-Zip: PORT CHARLOTTE, FL 33948**Title:** MGRM (X) Delete
Name: SELLEY, VALERIE P
Address: 17833 MURDOCK CIR
City-St-Zip: PORT CHARLOTTE, FL 33948**ADDITIONS/CHANGES:****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 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: CLAY O. SELLEY

MGRM

03/30/2007

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