

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000029758

Entity Name: A & J FONTAINE, LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

89 TEAKWOOD CIRCLE  
TEQUESTA, FL 33469

**New Principal Place of Business:**

**Current Mailing Address:**

89 TEAKWOOD CIRCLE  
TEQUESTA, FL 33469

**New Mailing Address:**

FEI Number: 20-2591545

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FONTAINE, ALEX  
89 TEAKWOOD CIRCLE  
TEQUESTA, FL 33469 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  
Name: FONTAINE, ALEX J MGRM  
Address: 89 TEAKWOOD CIRCLE  
City-St-Zip: TEQUESTA, FL 33469 PB

Title: MGRM  
Name: FONTAINE, JOANNE M MGRM  
Address: 89 TEAKWOOD CIRCLE  
City-St-Zip: JUPITER, FL 33469 PB

I hereby 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: ALEX J. FONTAINE

MGRM

04/30/2010

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