2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

Mar 09, 2006 8:00 am Secretary of State **DOCUMENT # L05000035851** 1. Entity Name JSJ HOLDINGS, LLC 02-24-2006 90241 020 ****50.00 Principal Place of Business Mailing Address 12350 U.S. HIGHWAY 19, NORTH 12350 U.S. HIGHWAY 19, NORTH CLEARWATER, FL 33764 CLEARWATER, FL 33764 2. Principal Place of Business 3. Mailing Address Suite. Act. #. etc. Suite, Apt. #, etc. 02212006 CR2E083 (11/05) City & State City & State 4. FEI Number Applied For 20-2705092 Not Applicable \$5.00 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BOUTZOUKAS, MICHAEL E Street Address (P.O. Box Number is Not Acceptable) 111 N. BELCHER ROAD, SUITE 201 CLEARWATER, FL 33765 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State ST MILES ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. MGRM TITLE ☐ Delete TITLE MORTEN, JAMES E -NAME NAME STREET ADDRESS C/O 12350 U.S. HIGHWAY 19 NORTH STREET ADDRESS CLEARWATER, FL 33764 CITY-S1-ZIP COTY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITS F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP ☐ Addition ☐ Oelete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY: ST-ZIP ☐ Addition Oelete (July 1997) TITLE Atte. NAME , I I NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP " 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

FILED

<u>727-531-895</u>7



ATTACHMENT 30002066

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 28, 2006

JSJ HOLDINGS, LLC 12350 U.S. HIGHWAY 19, NORTH CLEARWATER, FL 33764

Subject: JSJ HOLDINGS, LLC

Reference Number:

L0500003585

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/CJ ANNUAL REPORTS SECTION