

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000040348

Entity Name: TTJ, LLC

FILED
May 10, 2007
Secretary of State

Current Principal Place of Business:

409 SCHOOL AVENUE
H-3
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

PHILIP HALL
13602 OLD FARM DR
TAMPA, FL 33625 US

New Mailing Address:

FEI Number: 20-3824562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KOENIG, DAVID ESQ
1802 CLEVELAND
TAMPA, FL 33606 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: HALL, PHILIP
Address: 13602 OLD FARM DRIVE
City-St-Zip: TAMPA, FL 33625 US

Title: MGRM () Delete
Name: RABASSA, ED
Address: 2800 E 113TH AVE SUITE 101
City-St-Zip: TAMPA, FL 33612 US

Title: MGRM () Delete
Name: SUNBELT PROPERTIES O, F NEVADA, INC.
Address: 13602 OLD FARM DR
City-St-Zip: TAMPA, FL 33625 US

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:

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: PHILIP HALL

MGRM

05/10/2007

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