

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074469

Entity Name: CJJ LLC

FILED
Jan 22, 2006
Secretary of State

Current Principal Place of Business:

PO BOX 640952
BEVERLY HILLS, FL 34464 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 640952
BEVERLY HILLS, FL 34464 US

New Mailing Address:

FEI Number: 20-3362067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, JAMES F SR
1764 N CROOKED BRANCH DR
LECANTO, FL 34461 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: NELSON, JAMES F SR
Address: 1764 N CROOKED BRANCH DR
City-St-Zip: LECANTO, FL 34461 US

Title: MGRM () Delete
Name: NELSON, JAMES F JR
Address: 7590 SW 188TH AVE
City-St-Zip: DUNNELLON, FL 34432 US

Title: MGRM () Delete
Name: RIPPLE, PAUL C
Address: 8624 SW 200TH CIRCLE
City-St-Zip: DUNNELLON, FL 34431

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 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: JAMES F NELSON SR

MGRM

01/22/2006

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