


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 03, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L05000078716</b>	
<b>1. Entity Name</b> DMRJ PROPERTIES, LLC	

<b>Principal Place of Business</b> 1603 HUNTERS CREEK DR CANTONMENT, FL 32533	<b>Mailing Address</b> 1603 HUNTERS CREEK DR CANTONMENT, FL 32533
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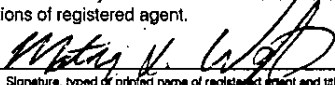
05012007 No Chg-LLC

CR2E083 (11/05)

<b>4. FEI Number</b> NOT APPLICABLE	<b>Applied For</b> Not Applicable
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  WRIGHT, MARTIN L 1603 HUNTERS CREEK DRIVE CANTONMENT, FL 32533
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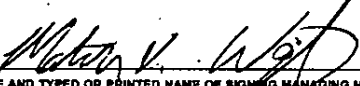
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<b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.</b>	
<b>SIGNATURE:</b>  <small>Signature, typed or printed name of registered agent and title if applicable.</small>	<b>DATE:</b> 5-1-07 <small>(NOTE: Registered Agent signature required when reinstating)</small>

<b>Filing Fee is \$50.00 Due by May 1, 2007</b>	U00000780254 05/25/07-80003-025 55.00
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9. MANAGING MEMBERS/MANAGERS	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	MGR WRIGHT, MARTIN L 1603 HUNTERS CREEK DRIVE CANTONMENT, FL 32533
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	MGR WRIGHT, DIANA L 1603 HUNTERS CREEK DRIVE CANTONMENT, FL 32533
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
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<b>DO NOT WRITE IN THIS SPACE</b>
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<b>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.</b>	
<b>SIGNATURE:</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<b>DATE:</b> 5-1-07 <b>DAYTIME PHONE #:</b> 850-554-8079