

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080589

Entity Name: T & J, L.L.C.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

47699 MANORWOOD DRIVE
NORTHVILLE, MI 48168

New Principal Place of Business:

Current Mailing Address:

47699 MANORWOOD DRIVE
NORTHVILLE, MI 48168

New Mailing Address:

FEI Number: 20-3461949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIGOLI, DEIRDRE
6249 AVENTURA DRIVE
SARASOTA, FL 34241 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: BRUNER, JEFFREY M TRUSTEE
Address: 47699 MANORWOOD DRIVE
City-St-Zip: NORTHVILLE, MI 48168

Title: MGRM () Delete
Name: BENTLEY, THOMAS
Address: 19701 AVALON
City-St-Zip: ST. CLAIRE SHORES, MI 48080

Title: MGRM () Delete
Name: BRUNER, ANDREA B TRUSTEE
Address: 47699 MANORWOOD DRIVE
City-St-Zip: NORTHVILLE, MI 48168

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: JEFFREY M. BRUNER

MGMR

01/14/2009

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