2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007
Secretary of State

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Entity Name: MJL&P, L.L.C.

Current Principal Place of Business:

11550 HIDDEN HARBOR WAY
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

PO BOX 551260
JACKSONVILLE, FL 32255

New Mailing Address:

FEI Number: 20-3583664 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANSBACHER & SCHNEIDER, P.A.
5150 BELFORT ROAD BLDG 100
JACKSONVILLE, FL 32256 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: LEWIS, BEN
Address: 11550 HIDDEN HARBOR WAY
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM ( ) Delete
Name: LEWIS, MARK
Address: 103 HARRINGTON POINT
City-St-Zip: CHAPEL HILL, NC 27516

Title: MGRM ( ) Delete
Name: LEWIS, STEVE
Address: 4505 S. OCEAN BLVD., APT. 608
City-St-Zip: HIGHLAND BEACH, FL 33487

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: BEN LEWIS M 04/20/2007

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