

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000101739

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: MJSL PROPERTIES LLC.

**Current Principal Place of Business:**

1316 BOWMAN ST.  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

1316 BOWMAN ST.  
CLERMONT, FL 34711 US

**New Mailing Address:**

FEI Number: 20-3627837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SOUTHARD, SAMUEL  
1316 BOWMAN ST  
CLERMONT, FL 34711 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: SOUTHARD, SAMUEL T  
Address: 11419 OLIVE BRANCH CT  
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: MGRM ( ) Delete  
Name: ANAHORY, JASON  
Address: 17918 SPENCER RD.  
City-St-Zip: ODESSA, FL 33556 US

Title: MGRM ( ) Delete  
Name: ANAHORY, MICHELLE  
Address: 17918 SPENCER RD.  
City-St-Zip: ODESSA, FL 33556 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: SAMUEL T. SOUTHARD

MGRM

04/15/2009

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