

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000101305

Entity Name: M2J DRIFTWOOD, LLC

FILED
Jan 14, 2011
Secretary of State

Current Principal Place of Business:

6921 PISTOL RANGE ROAD
SUITE 104
TAMPA, FL 33635 US

New Principal Place of Business:

6921 PISTOL RANGE ROAD
SUITE 101
TAMPA, FL 33635 US

Current Mailing Address:

6921 PISTOL RANGE ROAD
SUITE 104
TAMPA, FL 33635 US

New Mailing Address:

6921 PISTOL RANGE ROAD
SUITE 101
TAMPA, FL 33635 US

FEI Number: 26-1214449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, DAVID
6921 PISTOL RANGE ROAD
SUITE 104
TAMPA, FL 33635 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: MGR
Name: JOHNSON, DAVID
Address: 6921 PISTOL RANGE ROAD, SUITE 101
City-St-Zip: TAMPA, FL 33635 US

Title: MGR
Name: JOHNSON, LORI
Address: 6921 PISTOL RANGE ROAD, SUITE 101
City-St-Zip: TAMPA, FL 33635 US

Title: MGR
Name: MATTIACCIO, VICTOR
Address: 6921 PISTOL RANGE ROAD, SUITE 101
City-St-Zip: TAMPA, FL 33635 US

Title: MGR
Name: MATTIACCIO, JACQUELINE
Address: 6921 PISTOL RANGE ROAD, SUITE 101
City-St-Zip: TAMPA, FL 33635 US

Title: MGR
Name: MORALES, JOSE
Address: 6921 PISTOL RANGE ROAD, SUITE 101
City-St-Zip: TAMPA, FL 33635 US

Title: MGR
Name: MORALES, NORMA
Address: 6921 PISTOL RANGE ROAD, SUITE 101
City-St-Zip: TAMPA, FL 33635 US

I hereby 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: DAVID B. JOHNSON

MGR

01/14/2011

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