

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000104593

Entity Name: A & J FRAMING LLC

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6104 MAGNOLIA LANE NORTH  
CRESTVIEW, FL 32539

**New Principal Place of Business:**

**Current Mailing Address:**

6104 MAGNOLIA LANE NORTH  
CRESTVIEW, FL 32539

**New Mailing Address:**

FEI Number: 75-3257187

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPENCER, ROBIN  
37 TUPELO AVENUE  
FORT WALTON BEACH, FL 32548 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  
Name: SPENCER, SHAWN  
Address: 6104 MAGNOLIA LANE NORTH  
City-St-Zip: CRESTVIEW, FL 32539

Title: MGRM  
Name: SPENCER, ROBIN  
Address: 6104 MAGNOLIA LANE NORTH  
City-St-Zip: CRESTVIEW, FL 32539

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: ROBIN SPENCER

MGRM

02/18/2011

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