

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120435

FILED
Mar 09, 2008
Secretary of State

Entity Name: MTJ OF SOUTHWEST FLORIDA, LLC

Current Principal Place of Business:

2700 ROCKFILL ROAD
PO BOX 27
FORT MYERS, FL 339020027

New Principal Place of Business:

2700 ROCKFILL ROAD
FORT MYERS, FL 33916

Current Mailing Address:

2700 ROCKFILL ROAD
PO BOX 27
FORT MYERS, FL 339020027

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, C. BERK
2075 WEST FIRST STREET, SUITE 100
FORT MYERS, FL 33901 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: HIMSCHOOT, MICHAEL DEAN
Address: 8980 PASEO DE VALENCIA STREET
City-St-Zip: FORT MYERS, FL 33908

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V () Change (X) Addition
Name: HIMSCHOOT-MITCHELL, THERESA L
Address: 13190 IDYLVILD RD
City-St-Zip: FORT MYERS, FL 33905

Title: V () Change (X) Addition
Name: HIMSCHOOT, JASON R
Address: 12893 PASTURES WAY
City-St-Zip: FORT MYERS, FL 33913

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: THERESA L. HIMSCHOOT-MITCHELL V 03/09/2008

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