

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000036200

Entity Name: ASJ VENTURES, LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

830 SOUTH RIVER RD
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

830 SOUTH RIVER RD
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 26-2407499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRICKS, SHAWN
830 SOUTH RIVER RD
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

HENDRICKS, SHAWN D MGRM
830 SOUTH RIVER RD
ENGLEWOOD, FL 34223 US

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: SHAWN HENDRICKS

04/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HENDRICKS, SHAWN
Address: 1136 LARCHMONT DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM () Delete
Name: STAHL, RICHARD A
Address: 1636 NEW POINT CONFORT RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM () Delete
Name: ORTIZ, JOSE
Address: 1637 SARACEN LN
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HENDRICKS, SHAWN D MGRM
Address: 1136 LARCHMONT DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM (X) Change () Addition
Name: STAHL, RICHARD A MGRM
Address: 1636 NEW POINT CONFORT RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM (X) Change () Addition
Name: ORTIZ, JOSE J MGRM
Address: 1637 SARACEN LN
City-St-Zip: NORTH PORT, FL 34286

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: SHAWN HENDRICKS

MGRM

04/17/2009

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