

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000048018

Entity Name: BJA RESIDENTIAL, L.L.C.

FILED
Feb 13, 2009
Secretary of State

Current Principal Place of Business:

5150 BELFORT ROAD
BUILDING 100
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 551260
JACKSONVILLE, FL 32255

New Mailing Address:

FEI Number: 26-2636584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANSBACHER & ASHNEIDER, P.A.
5150 BELFORT ROAD
BUILDING 100
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

ANSBACHER & SCHNEIDER, P.A.
5150 BELFORT ROAD
BUILDING 100
JACKSONVILLE, FL 32256 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: ANSBACHER & SCHNEIDER, PA

02/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DOLINER, JEFFREY
Address: 5150 BELFORT ROAD
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGRM () Delete
Name: DOLINER HOCKMAN, ALLISON R
Address: 5150 BELFORT ROAD
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

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: JEFFREY DOLINER

M

02/13/2009

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