

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000059537

**FILED  
Feb 16, 2010  
Secretary of State**

**Entity Name:** AJTDM LLC

**Current Principal Place of Business:**

1005 COLLEGE BLVD W STE A  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

1005 COLLEGE BLVD W STE A  
NICEVILLE, FL 32578

**New Mailing Address:**

**FEI Number:** 26-3274854

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURKE, DARLENE K  
239 WAVA AVE  
NICEVILLE, FL 32578 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: BURKE, DARLENE K  
Address: 1005 COLLEGE BLVD W STE A  
City-St-Zip: NICEVILLE, FL 32578

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: DARLENE K BURKE

MGR

02/16/2010

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