

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000096036

Entity Name: TWO-E-PJ, LLC

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

**Current Principal Place of Business:**

607 SILVERTHORN ROAD  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

607 SILVERTHORN ROAD  
GULF BREEZE, FL 32561

**New Mailing Address:**

FEI Number: 26-3595520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PETTYJOHN, FRANK S  
607 SILVERTHORN ROAD  
GULF BREEZE, FL 32561 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: DR  
Name: PETTYJOHN, FRANK S  
Address: 607 SILVERTHORN ROAD  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: MS  
Name: GORE, ELISE P  
Address: 113 NANDINA ROAD  
City-St-Zip: GULF BREEZE, FL 32561 US

Title: MS  
Name: MASSEY, ELLEN P  
Address: 965 LUPINE CIRCLE  
City-St-Zip: BASALT, CO 81621 US

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: FRANK S PETTYJOHN

MGR

01/16/2010

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