

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000113492

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** TJJD HOLDINGS, LLC

**Current Principal Place of Business:**

27599 RIVERVIEW CENTER BLVD., STE 205  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

**Current Mailing Address:**

27599 RIVERVIEW CENTER BLVD., STE 205  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

**FEI Number:** 27-1755584

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GATES, TODD E  
27599 RIVERVIEW CENTER BLVD  
SUITE 205  
BONITA SPRINGS, FL 34134 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  
**Name:** GATES, TODD E  
**Address:** 27599 RIVERVIEW CENTER BLVD - SUITE 205  
**City-St-Zip:** BONITA SPRINGS, FL 34134

**Title:** CEO  
**Name:** HAYES, JOHN A  
**Address:** 27599 RIVERVIEW CENTER BLVD - SUITE 205  
**City-St-Zip:** BONITA SPRINGS, FL 34134

**Title:** COO  
**Name:** DAVID, CZOSCHKE A  
**Address:** 27599 RIVERVIEW CENTER BLVD - SUITE 205  
**City-St-Zip:** BONITA SPRINGS, FL 34134

**Title:** CFO  
**Name:** MAAS, JEFFERY T  
**Address:** 27599 RIVERVIEW CENTER BLVD - SUITE 205  
**City-St-Zip:** BONITA SPRINGS, FL 34134

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:** TODD E. GATES

MGRM

04/26/2012

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