

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002267

Entity Name: C & J REALTY, L.L.C.

FILED  
Apr 23, 2008  
Secretary of State

**Current Principal Place of Business:**

4059 GINGER DRIVE  
DIBERVILLE, MS 39540

**New Principal Place of Business:**

1338 FATHER RYAN AVENUE  
BILOXI, MS 39530

**Current Mailing Address:**

4059 GINGER DRIVE  
DIBERVILLE, MS 39540

**New Mailing Address:**

1338 FATHER RYAN AVENUE  
BILOXI, MS 39530

FEI Number: 64-0892419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 ( ) Delete  
Name: JOHANSEN, OSCAR  
Address: 4059 GINGER DRIVE  
City-St-Zip: DIBERVILLE, MS 39540

Title: MGR ( ) Delete  
Name: CROWSON, THOMAS D  
Address: 5016 FOURTH PLACE  
City-St-Zip: MERIDIAN, MS 393052019

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: JOHANSEN, OSCAR  
Address: 1338 FATHER RYAN AVENUE  
City-St-Zip: BILOXI, MS 39530

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: OSCAR W. JOHANSEN

MGR

04/23/2008

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