2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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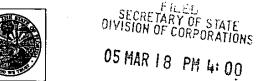
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MORRIS JUPITER ASSOCIATES, LLC

Principal Place of Business

350 VETERANS BLVD RUTHERFORD, NJ 07070 Mailing Address

350 VETERANS BLVD RUTHERFORD, NJ 07070





01052005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-1351804 Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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The above named entity submits this statement for the purpose of change the obligations of registered agent.	ging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE Signature hower or printed name of redistanced agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE

Filing Fee is \$50.00 Due by May 1, 2005

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	9.	MANAGING MEMBERS/MANAGERS
	NAME STREET AODRESS CITY-ST-ZIP	MGR MORRIS, JOSEPH D 350 VETERANS BLVD RUTHERFORD, NJ 07070
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MORRIS, ROBERT 350 VETERANS BLVD RUTHERFORD, NJ 07070
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DOYLE, MICHAEL C -STE-1410, NEMOURS BLDG, 1007 ORANGE ST WILMINGTON, DE 19801
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
	TITLE *	

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11... I hereby certify that the informal indicated on this report is true a limited liability company or the pplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information urate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the or trustee empowered to execute this report as required by Chapter 604. Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPE

STREET ADDRESS CITY-ST-ZIP

STEVEN B. RICHTER, CPA DIRECTOR OF ACCOUNTING