

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000001390

1. Entity Name
SJGC, LLC

FILED

01 MAY -7 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
5601 NW ST. JAMES ROAD
PORT ST. LUCIE FL 34983

Mailing Address
575 E. CHOCOLATE AVE.
HERSHEY PA 17033



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 54-1927827

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGRM
NAME MAYS, R. DANIEL
STREET ADDRESS 575 E. CHOCOLATE AVE.
CITY-ST-ZIP HERSHEY PA 17033 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MGRM
NAME GARCHIK, STEPHEN J
STREET ADDRESS 575 E. CHOCOLATE AVE.
CITY-ST-ZIP HERSHEY PA 17033 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MGRM
NAME CAPORALETTI, JOHN
STREET ADDRESS 575 E. CHOCOLATE AVE.
CITY-ST-ZIP HERSHEY PA 17033 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MGRM
NAME SNIDER, STEVEN S
STREET ADDRESS 1455 PENNSYLVANIA AVE. NW, SUITE 1000
CITY-ST-ZIP WASHINGTON DC 20004 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MGRM
NAME LEAHY, WILLIAM F
STREET ADDRESS 1455 PENNSYLVANIA AVE. NW, SUITE 1000
CITY-ST-ZIP WASHINGTON DC 20004 ☐ Delete

TITLE
NAME
STREET ADDRESS 16850 Sudley Rd
CITY-ST-ZIP Centerville, VA 20120 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate 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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/19/01

717-312-1355