

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000142491

Entity Name: LTZJ PROPERTIES, INC.

FILED  
Jan 21, 2009  
Secretary of State

## Current Principal Place of Business:

425 WEST TOWN PLAZA  
SUITE 106  
SAINT AUGUSTINE, FL 32092 US

## New Principal Place of Business:

## Current Mailing Address:

425 WEST TOWN PLAZA  
SUITE 106  
SAINT AUGUSTINE, FL 32092 US

## New Mailing Address:

FEI Number: 01-0822132      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SELLAR, SEWELL, RUSS, SAYLOR & JOHNSON, PA  
907 WEBSTER STREET  
LEESBURG, FL 34748 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: TAWIL, NICK  
Address: 425 WEST TOWN PLAZA SUITE 106  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: VP,D ( ) Delete  
Name: LAKE, MARLYN  
Address: 425 WEST TOWN PLAZA SUITE 106  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: T,D ( ) Delete  
Name: ZANON, STEVE  
Address: 425 WEST TOWN PLAZA SUITE 106  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: T,D ( ) Delete  
Name: JORDAN, RONALD  
Address: 425 WEST TOWN PLAZA SUITE 106  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN ZANON

TD

01/21/2009

Electronic Signature of Signing Officer or Director

Date