

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000060288

Entity Name: L J DEVELOPMENT GROUP, INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

11210 PHILLIPS INDUSTRIAL BLVD E
SUITE 13
JACKSONVILLE, FL 32256 US

Current Mailing Address:

11210 PHILLIPS INDUSTRIAL BLVD E
SUITE 13
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

2245 PLANTATION CENTER DRIVE
SUITE 4
ORANGE PARK, FL 32003 US

New Mailing Address:

P.O. BOX 9390
FLEMING ISLAND, FL 32006 US

FEI Number: 59-3409518

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, THOMAS F
11210 PHILLIP IND BLVD STE 13
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

JONES, THOMAS F
2245 PLANTATION CENTER DRIVE
ORANGE PARK, FL 32003 US

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:

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, THOMAS F
Address: 11210 PHILLIPS INDUSTRIAL BLVD E #13
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: LEE, DAVID E
Address: 11210 PHILLIPS INDUSTRIAL BLVD E #13
City-St-Zip: JACKSONVILLE, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: JONES, THOMAS F PRESIDE
Address: 2245 PLANTATION CENTER DRIVE
City-St-Zip: ORANGE PARK, FL 32003

Title: SEC/ (X) Change () Addition
Name: LEE, DAVID E SEC/TRE
Address: 2245 PLANTATION CENTER DRIVE SUITE 4
City-St-Zip: ORANGE PARK, FL 32003

Title: AVP () Change (X) Addition
Name: LEE, JAMES D AST. VP
Address: 2245 PLANTATION CENTER DRIVE
City-St-Zip: ORANGE PARK, FL 32003

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS F. JONES

PRES

04/18/2005

Electronic Signature of Signing Officer or Director

Date