

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000013662

Entity Name: LMJS PROPERTIES, LLC**Current Principal Place of Business:**11505 E BROADWAY
SEFFNER, FL 33584**Current Mailing Address:**P O BOX 428
MANGO, FL 33550**FEI Number:** 26-4623045**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARRETT, ROBERT R
11505 E BROADWAY
SEFFNER, FL 33584 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title	MGR
Name	JAEB, STEPHEN L
Address	P O BOX 428
City-State-Zip:	MANGO FL 33550

Title	MGRM
Name	GARRETT, ROBERT R
Address	P O BOX 428
City-State-Zip:	MANGO FL 33550

Title	MGRM
Name	JAEB, LORENA M
Address	P O BOX 428
City-State-Zip:	MANGO FL 33550

Title	MGRM
Name	JAEB, SANDRA D
Address	PO BOX 428
City-State-Zip:	MANGO FL 33550

Title	MANAGER, AUTHORIZED MEMBER
Name	JAEB, JOEL T
Address	P O BOX 428
City-State-Zip:	MANGO FL 33550

Title	MANAGER, AUTHORIZED MEMBER
Name	JAEB, JOSEPH A
Address	P O BOX 428
City-State-Zip:	MANGO FL 33550

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT R. GARRETT

MGR.MEMBER

02/10/2015

Electronic Signature of Signing Authorized Person(s) Detail_____
Date