

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000086847

**Entity Name:** D.J.'S THRIFT SHOP LLC

**Current Principal Place of Business:**

600 REID STREET  
PALATKA, FL 32177

**Current Mailing Address:**

PO BOX 746  
EAST PALATKA, FL 32131

**FEI Number:** 26-3309880

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COLEMAN, DEBORAH J  
150 CANNON ROAD  
EAST PALATKA, FL 32131 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 MGRM  
Name COLEMAN, DEBORAH J  
Address 150 CANNON ROAD  
City-State-Zip: EAST PALATKA FL 32131

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DEBORAH J COLEMAN

**SOLE MEMBER**

**06/13/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date