


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**


**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000024461  
 1. Entity Name  
 HJB, LLC



Principal Place of Business      Mailing Address  
 1140 ANDERSON STREET      1140 ANDERSON STREET  
 CLERMONT, FL 34711 US      CLERMONT, FL 34711 US

**DO NOT WRITE IN THIS SPACE**



01212004 No Chg-LLC      CR2E083 (10/03)

4. FEI Number 04-3736758	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 BENTZON, HANS J  
 1140 ANDERSON STREET  
 CLERMONT, FL 34711

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent, and title if applicable      (NOTE: Registered Agent signature required when reinstating)

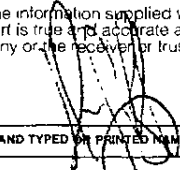
**Filing Fee is \$50.00  
 Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BENTZON, HANS J 1140 ANDERSON STREET CLERMONT, FL 34711
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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:       4/24/04      907 947 8790  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #