


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # L06000018614</b> 1. Entity Name CJH 54 LLC	
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Principal Place of Business 911 9TH STREET NORTHEAST FORT MEADE, FL 33841 US	Mailing Address 911 9TH STREET NORTHEAST FORT MEADE, FL 33841 US
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

HAGSTROM, CARL J  
911 9TH STREET NORTHEAST  
FORT MEADE, FL 33841

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75** In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.  
**Due by September 12, 2008**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HAGSTROM, CARL J 911 9TH STREET NORTHEAST FORT MEADE, FL 33841
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U000000954845  
07/14/08-90017-014 138.75

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

X **SIGNATURE:** Carl Hagstrom **7-10-08** **863-283-2755**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

**FILED**  
**Jul 14, 2008 08:00 AM**  
**Secretary of State**



07102008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4468564	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required