

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000046549

**Entity Name:** BJB PARTNERS LLC

**Current Principal Place of Business:**

1346 TIMBERIDGE LOOP SOUTH  
LAKELAND, FL 33809

**Current Mailing Address:**

1346 TIMBERIDGE LOOP SOUTH  
LAKELAND, FL 33809 US

**FEI Number:** 47-1710833

**Certificate of Status Desired:** Yes

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

BATES, CAROL S  
1346 TIMBERIDGE LOOP SOUTH  
LAKELAND, FL 33809 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 BATES, TIMOTHY C  
Address 1346 TIMBERIDGE LOOP SOUTH  
City-State-Zip: LAKELAND FL 33809

Title MGR  
Name BATES, BRIAN J  
Address 1346 TIMBERIDGE LOOP SOUTH  
City-State-Zip: LAKELAND FL 33809

Title MGR  
Name BATES, CAROL S  
Address 1346 TIMBERIDGE LOOP SOUTH  
City-State-Zip: LAKELAND FL 33809

Title MGR  
Name BATES, JULIA G  
Address 1346 TIMBERIDGE LOOP SOUTH  
City-State-Zip: LAKELAND FL 33809

*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:** CAROL S BATES

MGR

03/23/2015

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

\_\_\_\_\_  
Date