2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

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FILED Apr 18, 2005 08:00 AM Secretary of State

DOCUMENT # A0000001959 1. Entity Name THE CJB FAMILY LIMITED PARTNERSHIP					Secretary of State
Principal Place of Business 201 SE 24TH AVE POMPANO BEACH, FL 33062		Mailing Address 201 SE 24TH AVE POMPANO BEACH, FL 33062			
2. Principal F	Place of Business	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #. etc.			01052005 Chg-LP CR2E003 (10/03)
City & State		City & State			4. FEI Number Applied For 36-4401116 Not Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent
WITTE, LARRY F ESQ 201 SE 24TH AVE POMPANO BEACH, FL 33062				Street Address (P.O. Box Number is Not Acceptable)
POWPANO BEACH, PL 33002					
				City	FL Zip Code
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 - Signature, typed of Printed name of registered agent and title if applicable DATE					
9. Capital Contributions as Shown on record. \$1,136,800.00 In FLORIDA to date.					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION 1					ADDRESS CHANGES ONLY
DOCUMENT # NAME	BORG, JEROLD			EET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	1480 CRESS CREEK CT NAPERVILLE, IL 60563		CITY	r-ST-ZIP	
DOCUMENT #	BORG, CORRINE B		STRE	EET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	1480 CRESS CREEK CT		CITY	'-ST-ZIP	04/19/05-80021-006 526.25
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14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE: Jerold Borg 4/7/08 SIGNATURE: Date Destine Prone #					