


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 FEB 25 PM 4:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A02000000108 1. Entity Name THE CJB FAMILY LIMITED PARTNERSHIP NO. 2	
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Principal Place of Business 201 S.E. 24TH AVENUE POMPAÑO BEACH, FL 33062	Mailing Address 201 S.E. 24TH AVENUE POMPAÑO BEACH, FL 33062
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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01062004 Chg-LP CR2E003 (10/03)

4. FEI Number 01-0584581	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WITTE, LARRY F ESQUIRE 201 S.E. 24TH AVENUE POMPAÑO BEACH, FL 33062	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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9. Capital Contributions as Shown on record. \$1,212,656.00	10. Amount of Capital Contributions in FLORIDA to date.
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	BORG, JEROLD A	STREET ADDRESS	
NAME	1480 CRESS CREEK COURT	CITY-ST-ZIP	800030119808
STREET ADDRESS	NAPERVILLE, IL 60563		03/09/04--01056--021 **526.25
CITY-ST-ZIP			
DOCUMENT #	BORG, CORRINE B	STREET ADDRESS	
NAME	1480 CRESS CREEK COURT	CITY-ST-ZIP	
STREET ADDRESS	NAPERVILLE, IL 60563		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Jerold A. Borg
2/24/04

Date

Daytime Phone #

STAPLE CHECK HERE