

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90109 031 ****50.00

DOCUMENT # L01000020631

1. Entity Name

LDJB DEVELOPMENT L.L.C.



Principal Place of Business

1721 S. OCEAN BLVD.
DELRAY BEACH FL 33483

Mailing Address

1721 S. OCEAN BLVD.
DELRAY BEACH FL 33483

2. Principal Place of Business

5295 Town Center Road

Suite, Apt. #, etc.

Suite 201

City & State

Boca Raton FL

Zip

33486

Country

USA

3. Mailing Address

5295 Town Center Road

Suite, Apt. #, etc.

Suite 201

City & State

Boca Raton FL

Zip

33486

Country

USA



MOORE

CR2E083 (11/03)

4. FEI Number

65-1158189

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOLD, DAVID
1721 S. OCEAN BLVD.
DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent

Name DAVID H GOLD

Street Address (P.O. Box Number is Not Acceptable)

5295 TOWN CENTER ROAD

SUITE 201

City

BOCA RATON

FL

Zip Code

33486

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 or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State

Due By May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME GOLD, DAVID H
STREET ADDRESS 1721 S. OCEAN BLVD.
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE MGRM ☐ Delete
NAME O'HARE, LESID H
STREET ADDRESS 1721 S. OCEAN BLVD.
CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME DAVID H. GOLD
STREET ADDRESS 5295 TOWN CENTER ROAD, SUITE 201
CITY-ST-ZIP BOCA RATON, FL 33486

TITLE MGRM ☒ Change ☐ Addition
NAME LESLIE O'HARE
STREET ADDRESS 5295 TOWN CENTER ROAD, SUITE 201
CITY-ST-ZIP BOCA RATON, FL 33486

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

DAVID H. GOLD

1.22.04

561-416-2882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #