


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000033368 1. Entity Name JLB 401K, LLC	
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Principal Place of Business C/O REMAX HARBOR REALTY 1133 BAL HARBOR BLVD, STE. 1129 PUNTA GORDA, FL 33952	Mailing Address C/O REMAX HARBOR REALTY 1133 BAL HARBOR BLVD, STE. 1129 PUNTA GORDA, FL 33952
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04142005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0185684	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent BEVIS, JOHN L C/O REMAX HARBOR REALTY 1133 BAL HARBOR BLVD, STE. 1129 PUNTA GORDA, FL 33952

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BEVIS, JOHN L TRUSTEE 1133 BAL HARBOR BLVD, STE 1129 PUNTA GORDA, FL 33952
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04/25/05-80113-017 50.00

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IN THIS SPACE**

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:  SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date <u>4/14/05</u> Daytime Phone # <u>541-639-8500</u>