FILED
Mar 31, 2005 8:00 am
Secretary of State
03-31-2005 90128 005 ****50.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000037794

1. Entity Name
H&J COMPANY, LLC

20025674

Principal Place of Business	Mailing Address
2740 BUCKTHORN WAY NAPLES, FL 34105-3014	2740 BUCKTHORN WAY NAPLES, FL 34105-3014

03282005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4428690 (57-0497422) ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CHAMPION, HILDA
2740 BUCKTHORN WAY
NAPLES, FL 34105-3014

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

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	CHAMPION, HILDA
STREET ADDRESS	2740 BUCKTHORN WAY
CITY-ST-ZIP	NAPLES, FL 341053014
TITLE	MGR
NAME	CHAMPION, JAMES K
STREET ADDRESS	2740 BUCKTHORN WAY
CITY-ST-ZIP	NAPLES, FL 341053014
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE 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: H. Champion HILDA CHAMPION 3/28/05 (239)434-0158
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #