
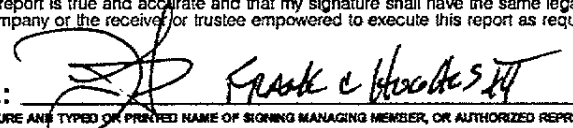


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Mar 02, 2006 08:00 AM
Secretary of State**

DOCUMENT # L04000071275		
1. Entity Name GJF, LLC		
Principal Place of Business 2657 AUGUSTA DRIVE SOUTH CLEARWATER, FL 33761	Mailing Address 2657 AUGUSTA DRIVE SOUTH CLEARWATER, FL 33761	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BEHAR, JORDAN 2657 AUGUSTA DRIVE SOUTH CLEARWATER, FL 33761		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>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BEHAR, JORDAN 2657 AUGUSTA DR S CLEARWATER, FL 33761	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUGHES, FRANK C III 106 PHILLIPS WAY PALM HARBOR, FL 34683	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERGOFFEN, GLENN 3599 WOODRIDGE PLACE PALM HARBOR, FL 34684	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		Date: 2/21/06 Daytime Phone #: 727 7852226



01152006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2010136	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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03/14/06-80023-015 50.00