2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M01000001451

1. Entity Name
JFB HOTEL FUND I, LLC



SECRETARY OF STATE DIVISION OF CORPORATIONS

05 JUN 30 AM 9: 56

Principal Place of Business

Mailing Address

240 N. WASHINGTON BLVD., 7TH FLOOR SARASOTA, FL 34236

240 N. WASHINGTON BLVD., 7TH FLOOR SARASOTA, FL 34236



DO NOT WRITE IN THIS SPACE

 06282005 No Chg-LLC
 CR2E083 (10/03)

 4. FEI Number
 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BRANCH, DANIEL 240 N. WASHINGTON BLVD., 7TH FLOOR C/O HORIZON MEDICAL GROUP, INC. SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE

OAI (100 17), 12 04200				
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. Fam familiar with, and accept the obligations of registered agent.				
SIGNATURE				
Filing Fee is \$50.00 Due by September 7, 2005				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANCH, DANIEL 240 N. WASHINGTON BLVD., 7TH FLOOR SARASOTA, FL 34236			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		07/	900057364929 07/12/0501067022 **200.00 DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE				

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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

PTPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

928/05 941-350-2385