


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 06, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # M98000001006**

1. Entity Name  
**CMB GENERAL PARTNER, LLC**



Principal Place of Business <b>2204 LAKESHORE DR          SUITE 215          BIRMINGHAM, AL 35-2098</b>	Mailing Address <b>2204 LAKESHORE DR          SUITE 215          BIRMINGHAM, AL 35-2098</b>
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**DO NOT WRITE IN THIS SPACE**



03172005No Chg-LLC      CR2E083 (10/03)

4. FEI Number <b>63-1202744</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**GREENHUT, DUDLEY H  
 23 SOUTH A STREET  
 PENSACOLA, FL 32574-2603**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOHNSON, JAMES MILTON 2204 LAKESHORE DR, STE. 215 BIRMINGHAM, AL 35209
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 04/06/05-80022-006 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**       **3-30-05**      **205-802-2300**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #