


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P04000050125</b> 1. Entity Name <b>J.L.H. CONSTRUCTION CO. INC.</b>	
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**FILED**  
**Jul 17, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business <b>3870 US HIGHWAY 19 SOUTH          PERRY, FL 32348</b>	Mailing Address <b>3870 US HIGHWAY 19 SOUTH          PERRY, FL 32348</b>
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07162008    No Chg-P    CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>20-0877661</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

HENDERSON, JOHN L  
 3870 US HIGHWAY 19 SOUTH  
 PERRY, FL 32348

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.

U00000955474  
 07/17/08-80006-016 150.00

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

FILE NOW!!! FEE IS \$150.00  
 Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HENDERSON, JOHN L
STREET ADDRESS	3870 US HIGHWAY 19 SOUTH
CITY-ST-ZIP	PERRY, FL 32348
TITLE	S
NAME	LANIER, CHARLOTTE M
STREET ADDRESS	114 KINGFISHER ROAD
CITY-ST-ZIP	PERRY, FL 32348
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other those empowered.

SIGNATURE: Charlotte M Lanier      Date: 7/16/08      Daytime Phone #: 850 584-9324

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR