

2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

02-26-2004 90056001 ***211.25
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000053810

1. Entity Name
JWH INVESTMENT MANAGEMENT, INC.



Principal Place of Business 301 YAMATO ROAD STE 2200 BOCA RATON, FL 33431	Mailing Address 301 YAMATO ROAD STE 2200 BOCA RATON, FL 33431
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66403353



2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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02022004 Chg-P CR2E034 (10/03)

City & State	City & State
Zip Country	Zip Country

4. FEI Number 65-0597266	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**TWIST, EDWIN B
301 YAMATO ROAD
SUITE 2200
BOCA RATON, FL 33431**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 reissuing) DATE _____

Amended AR is \$61.25

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

10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	HENRY, JOHN W
STREET ADDRESS	301 YAMATO ROAD, SUITE 2222
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	S <input type="checkbox"/> Delete
NAME	KOZAK, DAVID M.
STREET ADDRESS	301 YAMATO RD STE 2200
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	D <input type="checkbox"/> Delete
NAME	TWIST, EDWIN B.
STREET ADDRESS	301 YAMATO ROAD, STE 2200
CITY-ST-ZIP	BOCA RATON, FL
TITLE	P <input type="checkbox"/> Delete
NAME	RZEPczynski, MARK
STREET ADDRESS	301 YAMATO ROAD STE 2200
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	T <input type="checkbox"/> Delete
NAME	Webster, Kenneth, S.
STREET ADDRESS	301 YAMATO ROAD, STE 2200
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 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 collector 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 like empowered.

SIGNATURE: *KS Webster* *Treasurer Kenneth Webster* *3/5/04* *561-241-0018*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #