


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 MAR -9 PM 4:04

DOCUMENT # B01000000147	
1. Entity Name THE JWH EMPLOYEE FUND, L.P.	

Principal Place of Business THE CORPORATION TRUST CO., CT TRUST CENTER 1209 ORANGE STREET WILMINGTON, DE 19801	Mailing Address 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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02022004 Chg-LP CR2E003 (10/03)

4. FEI Number 06-1334744	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BRAICA PAUL Webster, Kenneth S. 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
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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 <i>K Webster</i> Signature, typed or printed name of registered agent and title if applicable.	<i>Kenneth S. Webster, Treasurer</i>	<i>2/5/04</i> DATE
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9. Capital Contributions as Shown on record. \$1,029,169.00	10. Amount of Capital Contributions in FLORIDA to date. 125,000	526 125.25
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	13. ADDRESS CHANGES ONLY
DOCUMENT # P01000070241 NAME WESTPORT CAPITAL MANAGEMENT CORP. ✓ STREET ADDRESS 301 YAMATO ROAD, SUITE 2200 CITY-ST-ZIP BOCA RATON, FL 33431	STREET ADDRESS CITY-ST-ZIP
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS 800031188358 CITY-ST-ZIP 03/25/04--01032--017 **526.25
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14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: <i>K Webster</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	<i>2/5/04</i> Date	<i>561-241-0013</i> Daytime Phone #
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