


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 30, 2005 08:00 AM
Secretary of State

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		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 06-1334744	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WEBSTER, KENNETH S 301 YAMATO ROAD, SUITE 2200 BOCA RATON, FL 33431			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 <u>KS Webster</u> DATE <u>4-24-05</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$1,029,169.00		10. Amount of Capital Contributions in FLORIDA to date. \$815,000.00		\$526.25	
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		STREET ADDRESS		
NAME	WESTPORT CAPITAL MANAGEMENT CORP.		CITY-ST-ZIP		
STREET ADDRESS	301 YAMATO ROAD, SUITE 2200				
CITY-ST-ZIP	BOCA RATON, FL 33431				
DOCUMENT #			STREET ADDRESS	UN00000345851	
NAME			CITY-ST-ZIP	04/30/05-80050-014 526.25	
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CITY-ST-ZIP					
14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE: <u>KS Webster</u> DATE <u>4-24-05</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

STAPLE CHECK HERE