2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED DOCUMENT # L01000016106 Apr 17, 2007 08:00 AM Secretary of State 1. Entity Name J & H BUILDERS, LLC Principal Place of Business Mailing Address 3775 MARTIN ST. PO BOX 560358 ORLANDO FL 32806 ORLANDO FL 32856 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/06) City & State City & State Applied For 4. FEI Number 59-3758811 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo HALLAUER, JUSTINA Street Address (P.O. Box Number is Not Acceptable) 3775 MARTIN STRETT ORLANDO FL 32806 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 9, MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. TITLE **MGRM** THIE ☐ Delete Change Addition NAME HALLAUER, JUSTINA STREET ADDRESS 3775 MARTIN ST. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-ZIP TOLE Delete THLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP TITLE Delete DITE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete HILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS C(TY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete U00000713080D Change ☐ Addition TITE NAME 04/26/07-80075-019 50.00 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. 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 offect as if made under eath; 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.