

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90175 044 ****50.00

DOCUMENT # L03000009448	
1. Entity Name T & H INVESTMENTS, LLC	

Principal Place of Business 1254 SOUTH JOHN YOUNG PARKWAY KISSIMMEE, FL 34741	Mailing Address 1254 SOUTH JOHN YOUNG PARKWAY KISSIMMEE, FL 34741
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01142005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1183790	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CHALIFOUX, THOMAS E
 1254 SOUTH JOHN YOUNG PARKWAY
 KISSIMMEE, FL 34741

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.

No change

SIGNATURE: *Thomas Chalifoux* DATE: *2/15/05*

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHALIFOUX, THOMAS E JR. 1254 SOUTH JOHN YOUNG PARKWAY KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CHALIFOUX, HARRY W 1254 SOUTH JOHN YOUNG PARKWAY KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. 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 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.

SIGNATURE: *Thomas Chalifoux* DATE: *2/15/05*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #