## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000030330

1. Entity Name

S & H VENTURES, LLC



FILED Jan 09, 2007 08:00 AN Secretary of State

Principal Place of Business

SIGNATURE:

SIGNATURE AND PIPED OR PRINTED

Mailing Address

2100 CONSTITUTION BLVD. STE. 202 SARASOTA, FL 34231 2100 CONSTITUTION BLVD. STE. 202 SARASOTA, FL 34231

01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 51-0478452

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

HANDLER, PAUL JEFFREY 2100 CONSTITUTION BLVD. STE. 202 SARASOTA, FL 34231

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>			
SIGNATURE.	Signature, typed or printed name of registered agent and title 4 applicable	(NOTE, Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50,00 Due by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANDLER, PAUL JEFFREY 6295 BUCKINGHAM STREET SARASOTA, FL 34238		U00000580285 01/10/07-80040-017 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SHERMAN, RUSSELL 1219 4TH STREET SARASOTA, FL 34236		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>.</u> .	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			· · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 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 rectured by Chapter 608, Florida Statutes.			

SIGNING MANAGING WEMBER, OR AUTHORIZED REPRESENTATIVE