

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 22, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000025446

1. Entity Name
GH, L.L.C.



Principal Place of Business
3430 NORTH US HWY 441
LAKE CITY, FL 32055

Mailing Address
3430 NORTH US HWY 441
LAKE CITY, FL 32055



06192006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
84-1643498

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~PATEL, GOVIND~~ Hemant Patel
3430 NORTH US HWY 441
LAKE CITY, FL 32055

**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.

SIGNATURE

HCPatel

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

06/20/06

DATE

**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
PATEL, GOVIND
3430 NORTH US HWY 441
LAKE CITY, FL 32055

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

U00000567493
06/22/06-80002-004 50.00

**DO NOT WRITE
IN THIS SPACE**

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 required by Chapter 608, Florida Statutes.

SIGNATURE:

HCPatel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

06/20/06

DATE

(386) 758-4224

Daytime Phone #