2008 LIMITED LIABILITY COMPANY

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS

FILED ANNUAL REPORT Apr 28, 2008 08:00 AN Secretary of State **DOCUMENT # L04000034077** 1. Entity Name S & H OF MARCO, LLC Principal Place of Business Mailing Address 1795 PIEDMONT CT. 1795 PIEDMONT CT. MARCO ISLAND, FL 34145 MARCO ISLAND, FL 34145 04252008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent TUCKER, EDMOND G DO NOT WRITE 950 N. COLLIER BLVD. SUITE 204 IN THIS SPACE MARÇO ISLAND, FL 34145 6. 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Recestered Agent signature required when rematators) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE SLOCUM, BETTY A NAME STREET ADDRESS 1795 PIEDMONT CT. MARCO ISLAND, FL 34145 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 05/21/08-80083-009 198.75 IIII F NAME STREET ADDRESS DO NOT WRITE CHY-ST-ZP IN THIS SPACE TILLE 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 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.

AGING MEMBER, OR AUTHORIZED REPRESENTATIVE