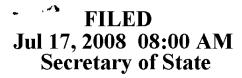
2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000037765 1. Entity Name JHE, LLC

Mailing Address

6 CROOKED BRIDGE WAY ORMOND BEACH, FL 32174





DO NOT WRITE IN THIS SPACE

07082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1139551

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVENUE DAYTONA BEACH, FL 32114

Principal Place of Business

6 CROOKED BRIDGE WAY

ORMOND BEACH, FL 32174

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nie obligations on egistered agent.				
SIGNATURE	Signature, typed or printed name of registered agent and	isle il applicable	(NOTE: Registered Agent signature required when reinstati	ng) DATE
FILE NOWIII FEE IS \$138.75 In accordance with s. 607.193(2)(b), F.S., the limited Due by September 12, 2008 liability company did not receive the prior notice.				
9. MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURKETT, CHARLES 6 CROOKED BRIDGE WAY ORMOND BEACH, FL 32174			Hoomooomnaan
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECR BURKETT, MONICA 6 CROOKED BRIDGE WAY ORMOND BEACH, FL 32174			U00000955449 07/17/08-80005-008 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP			D	O NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			11	N 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				

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