

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046265

FILED
Apr 08, 2008
Secretary of State

Entity Name: NJH, LLC

Current Principal Place of Business:

4260 NE 35 STREET
OCALA, FL 34479 US

New Principal Place of Business:

Current Mailing Address:

4260 NE 35 STREET
OCALA, FL 34479 US

New Mailing Address:

FEI Number: 20-1268223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEICHMAN, NANCY
4260 NE 35 STREET
OCALA, FL 34479 US

Name and Address of New Registered Agent:

VANDEVEN, HARVEY
4260 NE 35 STREET
OCALA, FL 34479 US

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.

SIGNATURE: HARVEY VANDEVEN

04/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DEICHMAN, NANCY
Address: 4260 NE 35 STREET
City-St-Zip: OCALA, FL 34479

Title: MGR () Delete
Name: VANDEVEN, HARVEY
Address: 4260 NE 35 STREET
City-St-Zip: OCALA, FL 34479

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MM (X) Change () Addition
Name: VANDEVEN, HARVEY
Address: 4260 NE 35 STREET
City-St-Zip: OCALA, FL 34479

Title: MEMB (X) Change () Addition
Name: COUNTS, STEVE
Address: 3601 SW 38TH AVE
City-St-Zip: OCALA, FL 34474

Title: MEMB () Change (X) Addition
Name: FABIAN, JEF
Address: 2631 SE 58TH AVE
City-St-Zip: OCALA, FL 34480

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: HARVEY VANDEVEN

MM

04/08/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date