2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000090671



FILED Mar 07, 2008 8:00 am **Secretary of State** 03-07-2008 90226 040 ***138 75

1. Entity Nam JANICE H	HOLDINGS,	LLC					03-07-2008	, 90220 (J40 I	136.73
Principal Place of Business 2611 NW 9TH TERR CAPE CORAL, FL 33993 Mailing Address 2611 NW 9TH TERR CAPE CORAL, FL 33993				3		נוממט	.0400			
Principal Place of Business - No P.O. Box # Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03042008	Chg-LLC	CR2E0	83 (12/06	i)
City & State			City & State			4. FEI Number 20-2020			1	Applied For Not Applicable
Zip — Country — 6. Name and Address of Current F		Zip Country		try	Certificate of Status Desired					
	Q. Hame an	a Address of Current P	registered Agent		Name	7. Name and 7	Address of New K	egisteredi	Agent	
MURPHY, JANICE A 2611 NW 9TH TERR					Street Address (P.O. Box Number is Not Acceptable)					
CAPE CO	RAL, FL 339	993								
8 The above	named entity of	shmits this statement for	the purpose of changing its	ragintar	City	ared agent or both	in the State of Ele	FL	Zip Co	
the obligat	ions of registere	d agent.		registeri	ed office of registe	ereu agent, or boti	i, in the State of Fio	ilida. Fam	iamiliai witi	i, and accept
SIGNATURE .	Signature, typed or pr	rinted name of registered agent a	nd title if applicable. (NOT	Registere	d Agent signature require	ad when reinstating)		DATE		
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After May		E IS \$138.75 e will be \$538.75					Florida	e check p Departm	ent of Sta	ate
After May	y 1, 2008 Fe		_	10.				Departm	ent of Sta	ate
9.	y 1, 2008 Fe	e will be \$538.75 MANAGING MEMBER	RS/MANAGERS	TITLE	I) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A	Florida	Departm	ent of Sta	ate
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9.	MGRM MURPHY, JA 2611 NW 9T	e will be \$538.75 MANAGING MEMBER ANICE A	_	TITLE NAM STRE	I	10 mg / 10 mg	Florida	Departm	ent of Sta	ate
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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: James Mush