2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

1/26/2006-90068-046-$55.00-$55.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JUL 18 AM 11:36

DOCUMENT # L05000086271

1. Entity Name

JJH OF SOUTH CAROLINA, LLC

Principal Place of Business

1852 BRIDGEWATER DRIVE
HEATHROW FL 32746

Mailing Address

1852 BRIDGEWATER DRIVE
HEATHROW FL 32746

2. Principal Place of Business

Zip

3. Mailing Address

Suite, Apt #, etc.

City & State

Zip

Country

1st MOORE CR2E083 (10/05)

4. FEI Number — Applied For / Not Applicable

5. Certificate of Status Desired — $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TANNLER, FREDERICK G
1852 BRIDGEWATER DRIVE
HEATHROW FL 32746

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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 ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOUSE, JOSEPH J 1852 BRIDGEWATER DRIVE HEATHROW FL 32746	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: ______ 6/25/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #