

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000091819

Entity Name: 3H ENTERPRISES, LLC

**FILED**  
**Jan 09, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

498 PALM SPRINGS DRIVE, SUITE 220  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

498 PALM SPRINGS DRIVE  
SUITE 220  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

498 PALM SPRINGS DRIVE  
SUITE 220  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ICARDI, JEFFREY A  
2180 WEST STATE ROAD 434, SUITE 6190  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

ICARDI, JEFFREY A  
2180 WEST STATE ROAD 434  
SUITE 6190  
LONGWOOD, FL 32779 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:

01/09/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HOWLAND, HOWARD H III  
Address: 498 PALM SPRINGS DRIVE, SUITE 220  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HOWARD HOWLAND

MGRM

01/09/2007

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