2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000048824

1. Entity Name

E & H FUNDING, LLC



FILED Mar 10, 2008 08:00 AM Secretary of State

Principal Place of Business

290 COCOANUT AVENUE

SUITE 1-A

SARASOTA, FL 34236 US

Mailing Address

290 COCOANUT AVENUE

SUITE 1-A

SARASOTA, FL 34236



03062008No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	83-0458704

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CURD, HOWARD R 290 COCOANUT AVENUE SUITE 1-A SARASOTA, FL 34236

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Signature, typed or printed name of registered agent and lifte if applicable	(NOTE: Registered Agent signature required when reinstaling)	DATE
SIGNATURE AND AND	HOWARD R. WAD	3/7/08
The above named entity submits this statement for the purpose of ch the obligations of registered agent.	nanging its registered office or registered agent, or both, a	n the State of Florida. I am familiar with, and accep
 D. The phone seried active submits this statement for the aurease of all 	annaina ita saajatasad allisa ay yaalataad ay ay ay balta'i	and a Court of Court of the Cou

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 000000853772 03/26/08-80079-015 138.75

9.	MANAGING MEMBERS/MANAGERS
NAME STREET ADDRESS CITY-ST-ZIP	MGR CURD, HOWARD R 290 COCOANUT AVENUE, SUITE 1-A SARASOTA, FL 34236
NAME STREET ADDRESS CITY-ST-ZIP	MGR CURD, EILEEN 290 COCOANUT AVENUE, SUITE 1-A SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/7/08

941-906-8580

Daytime Phone