


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L06000048824

1. Entity Name
E & H FUNDING, LLC



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 US
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03062008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 83-0458704	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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**

DO NOT WRITE IN THIS SPACE

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: *Howard R. Curd* HOWARD R. CURD 3/7/08

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

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CURD, HOWARD R 290 COCOANUT AVENUE, SUITE 1-A SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CURD, EILEEN 290 COCOANUT AVENUE, SUITE 1-A SARASOTA, FL 34236
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE 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: *Howard R. Curd* 3/7/08 941-906-8580

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #