2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085713

Current Principal Place of Business:

Entity Name: DHJH, LLC

City-St-Zip:

WARMINSTER, PA 18974

FILED Jan 15, 2009 Secretary of State

New Principal Place of Business:

| 50 W. STREET ROAD WARMINSTER, PA 1897 | 4 | | | |
|--|-------------------------------|-------------------------------------|---|--|
| Current Mailing Address: | | New Mailing Address | New Mailing Address: | |
| 50 W. STREET ROAD WARMINSTER, PA 18974 | | | 418 NEWBOLD ROAD JENKINTOWN, PA 19046 | |
| FEI Number: | FEI Number Applied For () | FEI Number Not Applicable (X) | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address o | Name and Address of New Registered Agent: | |
| HOLEWINSKI, DENNIS E 960 CAPE MARCO DRIVE COZUMEL #1003 MARCO ISLAND, FL 34145 US | | 940 CAPE MARCO DF VERACRUZ #1104 | HOLEWINSKI, DENNIS E 940 CAPE MARCO DRIVE VERACRUZ #1104 MARCO ISLAND, FL 34145 US | |
| The above named entity su in the State of Florida. | ubmits this statement for the | purpose of changing its registered | d office or registered agent, or both, | |
| SIGNATURE: | | | 01/15/2009 | |
| Electronic Signature of Registered Agent | | ent | Date | |
| MANAGING MEMBERS/MANAGERS: | | ADDITIONS/CHANGES: | ADDITIONS/CHANGES: | |

Title: MGRM Title: () Change () Addition () Delete HARP, JOSEPH C Name: Name: Address: 50 W. STREET ROAD Address: City-St-Zip: WARMINSTER, PA 18974 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: HARP, DAVID J Name: Address: 50 W. STREET ROAD Address: City-St-Zip: WARMINSTER, PA 18974 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HARP, LUCI M Name: Name: 50 W. STREET ROAD Address: Address: City-St-Zip: City-St-Zip: WARMINSTER, PA 18974 Title: Title: MGRM () Delete () Change () Addition Name: HARP, DIANE M Name: 50 W. STREET ROAD Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: JOSEPH C HARP MGRM 01/15/2009