



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00

In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No. 159579		2. Exact name of the limited liability company KJH INVESTMENTS, LLC	
3. State of Formation RHODE ISLAND		4. Brief description of the character of the business which is actually conducted in Rhode Island REAL ESTATE DEVELOPMENT	
5. Principal office address 1076 AQUIDNECK AVENUE		City MIDDLETOWN	State RHODE ISLAND
		Zip 02842	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name KENNETH HASLAM		Contact Title MEMBER	
Street Address 1076 AQUIDNECK AVENUE		City MIDDLETOWN	State RHODE ISLAND
		Zip 02842	
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	City
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11			
Agent Name JEREMIAH C. LYNCH, III		Address	
Address 97 JOHN CLARKE ROAD		City MIDDLETOWN	Zip 02842

This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

159579

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

File Date	6-25-08
Check No.	31880
By:	<i>MNC</i>
FOR SECRETARY OF STATE USE ONLY	

James P. Haslam
Signature of Authorized Person Date 6/24/08

Member
Print or Type Name of Authorized Person