


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 21, 2007 8:00 am**  
**Secretary of State**

02-21-2007 90102 012 \*\*\*\*50.00

DOCUMENT # L92000000062					
1. Entity Name HPG, L.C.					
Principal Place of Business 3030 LBJ FREEWAY, SUITE 600 DALLAS, TX 75234			Mailing Address 3030 LBJ FREEWAY, SUITE 600 DALLAS, TX 75234		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suits, Apt. #, etc. <i>500</i>			Suits, Apt. #, etc. <i>500</i>		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE	MGR			TITLE	
NAME	HOWE, DOUGAS T	<input type="checkbox"/> Delete		NAME	
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 600			STREET ADDRESS	
CITY - ST - ZIP	DALLAS, TX 75234			CITY - ST - ZIP	
TITLE	MGR			TITLE	
NAME	LUPTON, JACK	<input type="checkbox"/> Delete		NAME	<i>ERIC AFFELDT</i>
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 600			STREET ADDRESS	
CITY - ST - ZIP	DALLAS, TX 75234			CITY - ST - ZIP	
TITLE	MGR			TITLE	
NAME	HENSLEE, THOMAS T	<input type="checkbox"/> Delete		NAME	<i>RAND HUBUELY</i>
STREET ADDRESS	3030 LBJ FREEWAY, SUITE 600			STREET ADDRESS	
CITY - ST - ZIP	DALLAS, TX 75234			CITY - ST - ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE		<input type="checkbox"/> Delete		TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
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: <i>[Signature]</i>		<i>RAND HUBUELY</i>		<i>02/01/07 972-243-6191</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date		Daytime Phone #	