


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 29, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L02000005648</b> 1. Entity Name HAMPTONS DP NOTE, LLC	
---	---

Principal Place of Business C/O HPI PARTNERS I, INC. 2 GILLON STREET CHARLESTON, SC 29401	Mailing Address C/O HPI PARTNERS I, INC. 2 GILLON STREET CHARLESTON, SC 29401
--	--

**DO NOT WRITE IN THIS SPACE**

01232007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 01-0638467	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  WHWW, INC 390 N ORANGE AVE STE 1500 ORLANDO, FL 32801	<b>DO NOT WRITE IN THIS SPACE</b>
--	---------------------------------------

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARLEY, EDWIN W 2 GUILLON STREET CHARLESTON, SC 29401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000765508  
06/01/07-80009-004 55.00

**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:** *Ed W. Harley* **4-21-07** **843.853.6311**

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