


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L03000056007 1. Entity Name HLP I LLC |  |
|---|---|

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|--|--|
| Principal Place of Business 26212 MADRAS COURT PUNTA GORDA, FL 33983 | Mailing Address 26212 MADRAS COURT PUNTA GORDA, FL 33983 |
|--|--|

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04242008No Chg-LLC

CR2E083 (12/07)

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|---|--|
| 4. FEI Number 20-0559090 | 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

SEIDER, WILLIAM M
200 S. ORANGE AVENUE
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000936907
05/27/08-80028-020 138.75

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PST PALMER, PHILIP 26212 MADRAS CT PUNTA GORDA, FL 33983 |
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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  **Philip Palmer** 4/25/08 941-766-8315
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #