


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Mar 09, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000008081</b> 1. Entity Name <b>CDHM GROUP GP, LLC</b>	
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Principal Place of Business <b>ATTN: DONALD PACE 2137 N COURTENAY PKWY SUITE 23 MERRITT ISLAND FL 32953</b>	Mailing Address <b>ATTN: DONALD PACE 2137 N COURTENAY PKWY SUITE 23 MERRITT ISLAND FL 32953</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country

1st MOORE      CR2E083 (10/05)

6. Name and Address of Current Registered Agent  <b>PACE, DONALD 2137 N. COURTENAY PKWY., SUITE 23 MERRITT ISLAND FL 32953</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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4. FEI Number <b>20-0665558</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

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 terminating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2006**

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	PACE, DONALD OWNER		NAME		
STREET ADDRESS	2137 N COURTENAY PKWY, SUITE 23		STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND FL 32953		CITY-ST-ZIP		

000000461440  
03/20/06-80050-016 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: \_\_\_\_\_

Donald Pace