2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000015632

1. Entity Name
D H GREEN, LLC

Principal Place of Business	Mailing Address
2 CHARLES STREET	P. O. BOX 1568
ST. AUGUSTINE, FL 32084	ST. AUGUSTINE, FL 32085

DO NOT WRITE IN THIS SPACE

02192006 No Chg-LLC   CR2E083 (11/05)

4. FEI Number		Applied For
84-1639127		Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

GREEN, HENRY F III
2 CHARLES STREET
ST. AUGUSTINE, FL 32084

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee Is $50.00
Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	GREEN, HENRY F III
STREET ADDRESS	2 CHARLES STREET
CITY-ST-ZIP	ST. AUGUSTINE, FL 32084
TITLE	MGRM
NAME	HOEFER, DEBRA G
STREET ADDRESS	2 CHARLES STREET
CITY-ST-ZIP	ST. AUGUSTINE, FL 32084
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/15/06-80001-021 50.00

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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: _Henry F Green III_ Henry F Green 2-27-06 829-6858

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