

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043644

FILED
Jan 09, 2007
Secretary of State

Entity Name: DHI LLC

Current Principal Place of Business:

7802 KINGSPORTE PKWY
209
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7802 KINGSPORTE PKWY
209
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 20-1313821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AM&E SERVICES LLC
801 N. MAGNOLIA AVENUE, STE. 201
ORLANDO, FL 32802 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOLLOWAY, DIANE M
Address: 1224 PINE HARBOR POINT CIR.
City-St-Zip: ORLANDO, FL 32806

Title: MGRM () Delete
Name: HOLLOWAY, JAMES W
Address: 1224 PINE HARBOR POINT CIR.
City-St-Zip: ORLANDO, FL 32806

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: HAWKER, VIVIAN M
Address: 427 RAEHN ST.
City-St-Zip: ORLANDO, FL 32806

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES W HOLLOWAY

MGRM

01/09/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date