2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 19, 2007 08:00 Al

DOCUI 1. Entity Nam HFP, LLC		0050640		Seci	retary of Stat
Principal Plac		Mailing Address		- ·	
2930 JOHN I Brandon, F	MOORE RD L 33511-7140	2930 JOHN MOORE RD Brandon, FL 33511-71	40		
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L	O NOT WE	RITE IN THIS SP	ACE	4. FEI Number 20-1406009	Applied For Not Applicable
		The second section of the sect		5. Certificate of Status Desired	\$5.00 Additional Fee Required
	6. Name and Address o	Current Registered Agent	a secondaria	And the second of the second of the second of the second	
HOLCOME 201 N ARI TAMPA, F			tile of the second	DÖ ÑOT WRI IN THIS SPAC	TE CE
the obligat	named entity submits this strions of registered agent.	stement for the purpose of changing its req	listered office or register		
SIGNATURE.	Signature, typed or printed name of reg	istered agent and title 8 applicable. (NOTE Re	gistered Agent signature required	o when reinstating)	ATE · ·
Fi D	iling Fee is \$50.00 ue by May 1, 2007		14.		
9.	MANAGIN	G MEMBERS/MANAGERS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	
TITLE	MGR		a angen	The Charles of Manager Control of the Charles	
NAME	HARPER, WILLIAM H			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	The state of the s
STREET ADDRESS	2930 JOHN MOORE RE)		m - Billion Arthrithman (1994) - Sandyan Million (1994)	on the company of th
CITY-ST-ZP	BRANDON, FL 33511			The second of th	and the second s
TITLE			, (Carren	en en en en en man de aprilie n de fan en	The same of the sa
NAME ATTECT ADDRESS			N	The second of th	
STREET ADDRESS				indonon.	370194° ***

03/27/07-80102-010 50.00 TITLE NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS promise that the training have CITY-ST-ZIP redrighters is the significant wild the significant TITLE * *** 3' ** ** ** NAME STREET ADDRESS

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

NAME

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 ilmited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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中難10年 省公司等的主要工作工作。

SIGNATURE: W / / House	William Harper	3.16.07	(813) 258-5835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEN	MBER, OR AUTHORIZED REPRESENTATIVE	Dafe	Daysime Phone #