2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000069149 1. Entity Name DVI PARTNERS GP, LLC

FILED · Feb 26, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1001 NORTH HIGHWAY 1, SUITE 800 JUPITER, FL 33477

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DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

02082007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2023099	 Applied For
20-2023099	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional

Daytime Phone #

6. Name and Address of Current Registered Agent

WEISSLER, ROBERT I 2200 MUSEUM TOWER, 150 WEST FLAGER STREET MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

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	
F	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUDDEMEYER, DAVID 1001 NORTH US HIGHWAY 1, SUITE 800 JUPITER, FL 33477			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000646741 03/06/07-80042-017 50.00	
NAME STREET ADDRESS CITY-ST-ZIP		DO I	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature should company or the receiver or trustee employment to execute the state of the supplier of the sup	ualify for the exemptions contained in Chapter 119, all have the same legal effect as if made under oath ute this report as required by Chapter 608, Florida S	Florida Statutes. I further certify that the information that I am a managing member or manager of the statutes.	

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