2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000010251

1. Entity Name D.H.P., LLC



FILED Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business

162 CROOP LANE PORT CHARLOTTE, FL 33952 Mailing Address

162 CROOP LANE PORT CHARLOTTE, FL 33952



04232007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied For
26-0108775	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WILSON, MICHAEL M 17801 MURDOCK CIRCLE, SUITE A PORT CHARLOTTE, FL 33948

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	bove named entity submits this statement for the purpose of chang oligations of registered agent.	ing its registered office or registered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNATU	JRE		
	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, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HANSEN, PATRICIA A 162 CROOP LANE PORT CHARLOTTE, FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TOM, DAVID 162 CROOP LANE PORT CHARLOTTE, FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY ST. 719	

000000734679 05/10/07-80003-013 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: Warm from Javics on Signature and typed on printed name of signang managing member, or authorized representative

4-23-07

941-764-7460

Daylime Phone #