## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #-L05000016553

1. Entity Name GHP PROPERTIES-4541, LLC

No.

Principal Place of Business

PO BOX 377 BRANDON, FL 33509 Mailing Address

PO BOX 377

BRANDON, FL 33509

## FILED Apr 16, 2008 08:00 Al Secretary of State



 $\Box$ 

DO NOT WRITE IN THIS SPACE

04072008No Chg-LLC

 
 04072008 No Chg-LLC
 CR2E083 (12/07)

 4. FEI Number 20-2416605
 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and little if applicable

WOOD, CAROL W 269 SOUTH OSPREY AVENUE, SUITE 100 SARASOTA, FL 34236 DO NOT WRITE IN THIS SPACE

| 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  |                                |
|    |  |                                |

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000900812 04/29/08-80045-002 138.75

9. MANAGING MEMBERS/MANAGERS MGR TITLE PHILLIPS, GARY H NAME PO BOX 377 STREET ADDRESS BRANDON, FL 33509 CITY-ST-ZIP 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-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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 eceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

4/14/08

Daytime Phone \*