

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036184

Entity Name: AHP PROPERTIES I, LLC

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

5334 HILLCREST RD
CRESTVIEW, FL 32539

New Principal Place of Business:

Current Mailing Address:

5334 HILLCREST RD
CRESTVIEW, FL 32539

New Mailing Address:

FEI Number: 20-2862492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINES, JAMES P
315 S HYDE PARK AVE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

KARNIEWICZ, JUDY
1312 WEST FLETCHER AVENUE
SUITE B
TAMPA, FL 33612 US

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: JUDY KARNIEWICZ

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: POWELL, ANDERSON D
Address: 5334 HILLCREST ROAD
City-St-Zip: CRESTVIEW, FL 32539 US

Title: VP () Delete
Name: POWELL, ANDERSON D
Address: 5334 HILLCREST ROAD
City-St-Zip: CRESTVIEW, FL 32539 US

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ANDERSON D POWELL

PRES

04/28/2008

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