

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000053315

Entity Name: HDC PARTNERS, LLC

**FILED**  
**Feb 15, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

2804 TARFLOWER WAY  
NAPLES, FL 34105 US

**New Principal Place of Business:**

**Current Mailing Address:**

2804 TARFLOWER WAY  
NAPLES, FL 34105 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MEINERS, LOUIS M JR.  
2640 GOLDEN GATE PKWY  
SUITE 205  
NAPLES, FL 34105 US

**Name and Address of New Registered Agent:**

MEINERS, LOUIS M JR.  
3073 HORSESHOE DRIVE SOUTH  
SUITE 210  
NAPLES, FL 34104 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: LOUIS M MEINERS, JR.

02/15/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: COPPERMAN, HAROLD D  
Address: 2804 TARFLOWER WAY  
City-St-Zip: NAPLES, FL 34105 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HAROLD D. COPPERMAN

MGRM

02/15/2006

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