


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000122688**  
 1. Entity Name  
**CHI POWER, LLC**



Principal Place of Business 34324 PARK LANE LEESBURG, FL 34788 US	Mailing Address 34324 PARK LANE LEESBURG, FL 34788 US
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**DO NOT WRITE IN THIS SPACE**



04082007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3999610	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

VOCCI, MARK J  
 34324 PARK LANE  
 LEESBURG, FL 34788

**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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
 Due by May 1, 2007**

U00000708542  
 04/24/07-80119-007 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VOCCI, MARK J 34324 PARK LANE LEESBURG, FL 34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VOCCI, FAWN D 34324 PARK LANE LEESBURG, FL 34788
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**DO NOT WRITE IN THIS SPACE**

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:** Mark J. Vocci MARK J Vocci 4/18/07 352-360-0507  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #