

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 21, 2008 8:00 am**  
**Secretary of State**

05-21-2008 90204 028 \*\*\*188.75

**DOCUMENT # L06000024059**



1. Entity Name  
P. D. H. LLC

Principal Place of Business  
227 NW BAYPATH DRIVE  
CRYSTAL RIVER, FL 34428

Mailing Address  
227 NW BAYPATH DRIVE  
CRYSTAL RIVER, FL 34428

60042447



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03312008

Chg-LLC

CR2E083 (12/06)

4. FEI Number

20-5180749

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

FITZPATRICK, PATRICK S  
227 N W BAY PATH DRIVE  
CRYSTAL RIVER, FL 34429

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME FITZPATRICK, PATRICK S  
STREET ADDRESS 227 NW BAYPATH DRIVE  
CITY-ST-ZIP CRYSTAL RIVER, FL 34429

TITLE MGRM ☐ Delete  
NAME YOX, DALE R  
STREET ADDRESS 335 N W MAGNOLIA CIRCLE  
CITY-ST-ZIP CRYSTAL RIVER, FL 34429

TITLE MGRM ☒ Delete  
NAME BUCKINGHAM, HAROLD G JR  
STREET ADDRESS 31110 REED ROAD  
CITY-ST-ZIP DADE CITY, FL 33525

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Change ☒ Addition  
NAME Glenn L. Yox  
STREET ADDRESS 8916 W. Wauchula Drive  
CITY-ST-ZIP Crystal River Fl. 34428

TITLE MGRM ☐ Change ☒ Addition  
NAME EDWARD J. Perna  
STREET ADDRESS 4965 W. Anquas Drive.  
CITY-ST-ZIP Beverly Hills Fl. 34465

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

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

Date

Daytime Phone #

4-7-08 (352) 257-3242

ATTACHMENT



60042447  
#L06000024059

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: P.D.H. LLC

2. This limited liability company was organized under the laws of:

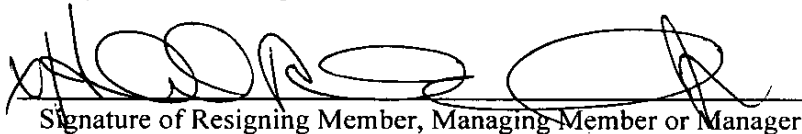
THE STATE OF FLORIDA

3. The Florida document/registration number of this limited liability company is:

L 060000 24059

4. I, Harold G. Buckingham Jr., hereby resign as a MGRM  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

ATTACHMENT

60042447  
# 606000024059

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

P. D. H. LLC.

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mailing Address:**

227 NW Baypath Drive  
Crystal River, FL 34428

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Patrick S. Fitzpatrick

Name

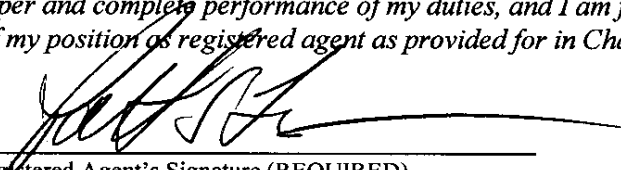
227 NW Baypath Drive

Florida street address (P.O. Box **NOT** acceptable)

Crystal River 1 FL 34428

City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ATTACHMENT

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Harold G. Buckingham Sr.	3110 Reed Road DADE City FL. 33525	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Glen L. York	8916 W. Wauchula Drive Crystal River FL. 34428	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Edward J. Pernu	4965 W. Angus Drive Beverly Hills FL. 34465	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

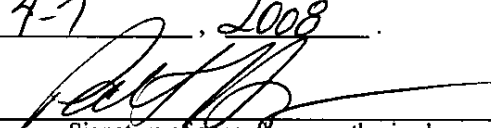
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated 4-7, 2008



Signature of a member or authorized representative of a member

Patrick S. Fitzpatrick

Typed or printed name of signee