

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045118

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: HPIP, LLC

**Current Principal Place of Business:**

1108 RADCLIFFE AVE.  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1132  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

FEI Number: 20-4799062      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PARRY, JOHN R  
1108 RADCLIFFE AVE.  
LYNN HAVEN, FL 32444 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PARRY, JOHN R  
Address: 1108 RADCLIFFE AVE.  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: MGRM  
Name: HERRING, CHRISTOPHER R  
Address: 916 COBIA DR  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

I hereby 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: CHRISTOPHER HERRING      MGRM      04/27/2012

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