

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000081237

Entity Name: LHRP, LLC

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

11155 W CLOVERHILL CIR  
JACKSONVILLE, FL 32257

## **New Principal Place of Business:**

8113 SAN JOSE MANOR DR. E.  
UNIT #1  
JACKSONVILLE, FL 32217

## **Current Mailing Address:**

11155 W CLOVERHILL CIR  
JACKSONVILLE, FL 32257

## **New Mailing Address:**

PO BOX 56973  
JACKSONVILLE, FL 32241

FEI Number: 20-5391489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HILBERT, LANCE M  
11155 W CLOVERHILL CIR  
JACKSONVILLE, FL 32257 US

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

HILBERT, LANCE M  
8113 SAN JOSE MANOR DR. E.  
UNIT #1  
JACKSONVILLE, FL 32217 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/25/2011

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HILBERT, LANCE M  
Address: PO BOX 56973  
City-St-Zip: JACKSONVILLE, FL 32241

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: LANCE M HILBERT

MGRM

04/25/2011

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