## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000048011

Entity Name: AHG-GP MEMBER, L.L.C.

329 NORTH PARK AVENUE, SUITE 300

WINTER PARK, FL 32789

Address:

City-St-Zip:

FILED May 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1551 SANDSPUR ROAD 329 NORTH PARK AVENUE, SUITE 300 WINTER PARK, FL 32789 MAITLAND, FL 32751 **Current Mailing Address: New Mailing Address:** 329 NORTH PARK AVENUE, SUITE 300 1551 SANDSPUR ROAD WINTER PARK, FL 32789 MAITLAND, FL 32751 FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **B&C CORPORATE SERVICES OF CENTRAL FLORIDA** CARPENTER, KEREY C 1551 SANDSPUR ROAD 390 NORTH ORANGE AVENUE, SUITE 1400 ORLANDO, FL 32801 MAITLAND, FL 32751 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: KEREY CARPENTER 05/05/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete DOODY, TRICIA Name: Name: Address: 329 NORTH PARK AVENUE, SUITE 300 Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: MGR Title: ( ) Delete () Change () Addition Name: BROCK, JAY P Name: Address: 329 NORTH PARK AVENUE, SUITE 300 Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MISSIGMAN, PAUL M Name: Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: ALAN H. GINSBURG MEM 05/05/2009