

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001798

Entity Name: GH CAPITAL PARTNERS, LLC

FILED
Jan 12, 2007
Secretary of State

Current Principal Place of Business:

10 CAMPUS BLVD.
NEWTOWN SQUARE, PA 19073

New Principal Place of Business:

Current Mailing Address:

10 CAMPUS BLVD.
NEWTOWN SQUARE, PA 19073

New Mailing Address:

FEI Number: 23-3018225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
1333 N. DUVAL ST
TALLAHASSEE, FL 32303 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:

01/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: HOLLOWAY, GARY M
Address: 10 CAMPUS BLVD.
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: VP () Delete
Name: ROBINSON, BRUCE
Address: 10 CAMPUS BLVD.
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: AS () Delete
Name: DIGIUSEPPE, ROBERT
Address: 10 CAMPUS BLVD.
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: AS () Delete
Name: CARDAMONE, ANTHONY J
Address: 10 CAMPUS BLVD.
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ASEC (X) Change () Addition
Name: DIGIUSEPPE, ROBERT
Address: 10 CAMPUS BLVD.
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: ASEC (X) Change () Addition
Name: CARDAMONE, ANTHONY J
Address: 10 CAMPUS BLVD.
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: VP () Change (X) Addition
Name: HOLLOWAY, JR, GARY M
Address: 10 CAMPUS BLVD
City-St-Zip: NEWTOWN SQUARE, PA 19073

Title: VP/S () Change (X) Addition
Name: MACCHIONE, JOSEPH M
Address: 10 CAMPUS BLVD
City-St-Zip: NEWTOWN SQUARE, PA 19073

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

SIGNATURE: ANTHONY J. CARDAMONE

ASEC

01/12/2007

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