


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2007 08:00 AM
Secretary of State


DOCUMENT # L03000007807

1. Entity Name
HIRSCH/REID ENTERPRISES, LLC



Principal Place of Business 205 DUNCAN TRAIL LONGWOOD, FL 32779	Mailing Address 205 DUNCAN TRAIL LONGWOOD, FL 32779
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DO NOT WRITE IN THIS SPACE



01032007No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**HIRSCH, RONALD T
 205 DUNCAN TRAIL
 LONGWOOD, FL 32779**

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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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HIRSCH, RONALD T 205 DUNCAN TRAIL LONGWOOD, FL 32799
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REID, BETTY 205 DUNCAN TRAIL LONGWOOD, FL 32779
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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: *Betty Reid* 1-10-07 407-862-7719

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #