## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Apr 25, 2005 8:00 am Secretary of State 04-25-2005 90103 020 \*\*\*\*50.00

DOCUN 1. Entity Name HERON, L	9	# L04000032	937					λοος	5532	1	
Principal Place of Business 8800 GRAND OAK CIR, STE 400 TAMPA, FL 33637			Mailing Address 8800 GRAND OAK CIR, STE 400 TAMPA, FL 33637				E FOLKTION I ON I	*e***			<b>711</b> 1   11   12   12   12   12   12   12
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04132005	Chg-LLC	CR2E	083 (10/03)	
City & State			City & State				4. FEI Numbe	r 84-1645913		<del></del>	ot Applicable
Zip	Country		Zip Countr		try		5. Certificate	of Status Desired		\$5.00 Add Fee Require	
	6,_Name	and Address of Current F	legistered Agent		Name		7Name and	Address of New F	tegistered	Agent -	
DAVID J. POWERS, P.A. 7777 GLADES RD, STE 300						iress (F	O. Box Numbe	r is Not Acceptabl	8)		
BOCA RAT	ON, FL	33434			<del></del>						
		· _			City			<del>-</del>	FL	Zip Cod	le
		ly submits this statement for tered agent.	the purpose of changing its r	registere	d office or re	gistere	ed agent, or both	h, in the State of Fl	orida. I am	familiar with,	and accept
SIGNATURE _	Signature, lyped	or printed name of registered agent a	nd title if applicable. (NOTE:	: Registered	d Agent signature :	required	when reinstating)		DATE		
E11	Voc Foo	- 650 00							re ebank :	noveble to	
Filing Fee is \$50.00 Due by May 1, 2005							Make check payable to Florida Department of State				
, , , , , , , , , , , , , , , , , , ,	ие ву ма	y 1, 2005						Florid	a Departn	nent of Stat	te
9.	le by Ma	y 1, 2005  MANAGING MEMBEI	RS/MANAGERS	10.	····			Florid			te
	те ву ма		RS/MANAGERS	TITLE NAMI STRE	ET ADDRESS 8	3800	A y I, LLC Grand Oak Cii a, FL 33637	ADDITIONS			Addition
9. ITTLE NAME STREET ADDRESS	ie by Ma		<del></del>	TITLE NAMI STRE CITY- TITLE NAMI STRE	E FET ADDRESS & ST-ZIP N E FET ADDRESS & SE	Fidelit 8800 ( Tampa MGRM Fidelit 8800 (	y I, LLC Grand Oak Cit a, FL 33637	ADDITIONS		3	
9.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STRE CITY TITLE NAME STRE CITY TITLE NAME STRE	ET ADDRESS E	Fidelity 8800 (Tampa MGRM Fidelity 8800 (Tampa MGRM Fidelity 8800 (	y I, LLC Grand Oak Cir a, FL 33637 M y II, LLC Grand Oak Cir a, FL 33637	ADDITIONS rcle #400		Change	Addition
9.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAMI STREE CITY TITLE NAMI STREE CITY TITLE TITL	ET ADDRESS	Fidelity 8800 (Tampa MGRM Fidelity 8800 (Tampa MGRM Fidelity 8800 (	y I, LLC Grand Oak Cit a, FL 33637  I y II, LLC Grand Oak Cit a, FL 33637  I y III, LLC Grand Oak Cit	ADDITIONS rcle #400		Change	
9.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS			☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREE CITY TITLE NAME STREE STREE	ET ADDRESS ST-ZIP N   E	Fidelity 8800 (Tampa MGRM Fidelity 8800 (Tampa MGRM Fidelity 8800 (	y I, LLC Grand Oak Cit a, FL 33637  I y II, LLC Grand Oak Cit a, FL 33637  I y III, LLC Grand Oak Cit	ADDITIONS rcle #400		Change Change	Addition  Addition
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