

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000004965
 1. Entity Name
HEISER #2, LLC



Principal Place of Business 10 LIVE OAK LANE PALM COAST, FL 32137	Mailing Address 10 LIVE OAK LANE PALM COAST, FL 32137
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DO NOT WRITE IN THIS SPACE



03282006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3640486	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

MURTAGAH, JOE
 14 WAVECREST PL
 PALM COAST, FL 32164

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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 reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2006

U00000499069
 04/24/06-80015-021 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HEISER, GARY G 10 LIVE OAK LANE PALM COAST, FL 32137
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HEISER, FRANCES N 10 LIVE OAK LANE PALM COAST, FL 32137
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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 *Frances N Heiser* **4/4/06** **386 445 2254**

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