

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2004 8:00 am
Secretary of State

05-13-2004 90324 004 ****55.00

DOCUMENT # L01000015704

1. Entity Name

HEID ENTERPRISES OF FLORIDA, LLC

DO NOT WRITE IN THIS SPACE

24075147

2. Principal Place of Business
101 Stover Drive

Suite, Apt. #, etc.

3. Mailing Address
101 Stover Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Delaware, Ohio

City & State
Delaware, Ohio

4. FEI Number
58-2657902

Applied For
Not Applicable

Zip
43015

Country
USA

Zip
43015

Country
USA

5. Certificate of Status Desired ☒ \$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ROBERT L. HEID

Street Address (P.O. Box Number is Not Acceptable)
4307 Gulfstream Parkway

City
Cape Coral

FL

Zip Code
33993

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.

SIGNATURE Robert L. Heid
Signature typed or printed name of registered agent and title if applicable

January , 2004
DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
Robert L. Heid
4307 Gulfstream Parkway
Cape Coral, Florida 33993

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
Patricia A. Heid
4307 Gulfstream Parkway
Cape Coral, Florida 33993

TITLE
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STREET ADDRESS
CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Robert L. Heid
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

January , 2004 (740)363-9222
Date Daytime Phone #

CR2E083B (12/01)