2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: James White, Manager
SIGNATURE AND TIPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OF AUTHORIZED REPRESENTATIVE

FILED May 02, 2005 8:00 am Secretary of State

954-760-5000 Daytime Phone #

4/25/05 Date

DOCUMENT # L01000020424 1. Entity Name HEARTWOOD 14, LLC							05-02-2	005 903	65 029) ****5(0.00	
	e of Business IUNRISE BLVD. RDALE, FL-33304 -	Mailing Address -1750 EAST SUNRISE BLVDFORT LAUDERDALE, FL -33304			14012922							
2100 We	lace of Business st Cypress Creek Rd.	3. Mailing Address 2100 West Cypress Creek Rd			k Rd							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				04152005	Chg-LLC	; c	R2E08	3 (10/03)		
City & State Fort La	e uderdale, FL	City & State Fort Lauderdale, FL				4. FEI Numb					ptied For at Applicable	
Zip 33	309 Country	^{Zip} 33309	ry	5. Certificate of Status Desired S5.00 Additional Fee Required								
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name							
DAUGHERTY, ST. JOHN -1750 EAST SUNRISE BLVDFORT LAUDERDALE, FL 33304-					Street Address (P.O. Box Number is Not Acceptable) 2100 West Cypress Creek Road							
			-	City						Zip Cod	e	
8. The above pared entity submits this statement for the purpose of changing its register.					Fort Lauderdale					9		
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 Signature, typico or lighted name of registered agent and title if permetable. (NOTE: Registered Agent signature required when reinstating) DATE												
	ling Fee is \$50.00 ue by May 1, 2005						F	Make ch Torida Dej		_	9	
9.	MANAGING MEMBER		10.				ADDIT	IONS/CHA		Change	- Laterian	
TITLE NAME	MGR LEVAN, ALAN	☐ Delete	TITLE NAME						,	Λ	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	1750 EAST SUNRISE BLVD. FORT LAUDERDALE, FL-33304-						ypress (dale, Fl			,		
TITLE NAME	MGR WHITE, JAMES	☐ Delete	TITLE NAME						(Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	1750 EAST SUNRISE BLVD.	_					ypress (dale, F			l		
TITLE	MGR	☐ Delete	TITLE							Change	☐ Addition	
NAME STREET ADDRESS	ABDO, JOHN E 1750 EAST SUNRISE BLVD.		NAME STREE	T ADDRESS	2100	West C	ypress	Creek	Road	i		
CITY-ST-ZIP	FORT LAUDERDALE, FL 93304		CITY-:	ST-ZIP	Fort	Lauder	dale, F	L 333	09			
NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete							[□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deleta	1						I	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4	☐ Delete		i					[☐ Change	☐ Addition	
11. I hereby of indicated limited lia	certify that the information supplied with on this report is true and accurate and bility company or the receiver of trustee	this tiling does not qualify fo that the signature shall have e employeed to execute this	or the exeme the same report as	nption stat legal effect required b	ed in Se ot as if m by Chapt	ction 119.07(3 nade under oat er 608, Florida)(i), Florida Sta th; that I am a a Statutes.	itutes. I furth managing i	ner certif nember	y that the ii or manage	nformation er of the	