

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021183

FILED  
Jan 15, 2007  
Secretary of State

Entity Name: LYONS HERITAGE LAND, L.L.C.

**Current Principal Place of Business:**

9240 MARKETPLACE ROAD  
SUITE 1  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

9240 MARKETPLACE ROAD  
SUITE 1  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 65-1157045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

LYONS, BOBBY R  
9240 MARKETPLACE ROAD  
SUITE 1  
FORT MYERS, FL 33912 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LYONS HOLDING INC,  
Address: 9240 MARKETPLACE ROAD #1  
City-St-Zip: FORT MYERS, FL 33912

Title: P ( ) Delete  
Name: LYONS, BOBBY R  
Address: 9240 MARKETPLACE ROAD, SUITE 1  
City-St-Zip: FORT MYERS, FL 33912

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: BOBBY R LYONS

P

01/15/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date