2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # L02000034300

DAVIS HERITAGE GP HOLDINGS, LLC



FILED Mar 21, 2005 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

20725 S.W. 46TH AVENUE___ NEWBERRY, FL 32669

20725 S.W. 46TH AVENUE NEWBERRY, FL 32669



01112005 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (10/03)

4. FEI Number 72-1551302

Not Applicable

Applied For

5. Certificate of Status Desired

\$5.00 Additional Fee Required

5. Name and Address of Current Registered Agent

SITTERSON, CURTIS H 150 WEST FLAGLER STREET, 2200 MUSEUM TOWER MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered	ed office or registered agent, or both, in the State of Florida.	I am familiar with, and accept
the obligations of registered agent.	•	·

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstalling)

DATE

Filing Fee is \$50.00 Due by May 1, 2005

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9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DAVIS, STEFAN M MGRM 20725 SW 46 AVE NEWBERRY, FL 32669	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

-Stefan M. Davis

2/24/05

352-472-7773

Daytime Phone #