

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034748

Entity Name: HERITAGE GROUP LLC

FILED
Jan 16, 2008
Secretary of State

Current Principal Place of Business:

18420 SE HERITAGE DR.
TEQUESTA, FL 33469

New Principal Place of Business:

162 SPYGLASSLANE
JUPITER, FL 33477

Current Mailing Address:

18420 SE HERITAGE DR.
TEQUESTA, FL 33469 US

New Mailing Address:

162 SPYGLASSLANE
JUPITER, FL 33477

FEI Number: 55-0820816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEVIZOS, PETER J
18420 SE HERITAGE DR.
TEQUESTA, FL 33469 US

Name and Address of New Registered Agent:

ALEVIZOS, PETER J
162 SPYGLASS LANE
JUPITER, FL 33477 US

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:

01/16/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALEVIZOS, PETER J
Address: 18420 SE HERITAGE DR.
City-St-Zip: TEQUESTA, FL 33469 US

Title: MGRM () Delete
Name: ALEVIZOS, NANCY
Address: 18420 SE HERITAGE
City-St-Zip: TEQUESTA, FL 33469 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ALEVIZOS, PETER J
Address: 162 SPYGLASS LANE
City-St-Zip: JUPITER, FL 33477 US

Title: MGRM (X) Change () Addition
Name: ALEVIZOS, NANCY
Address: 162 SPYGLASS LANE
City-St-Zip: JUPITER, FL 33477 US

I hereby certify that the information supplied with this filing does not qualify 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: PETER ALEVIZOS

MGRM

01/16/2008

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