


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000003775
 1. Entity Name
HEIGHTS PROPERTIES, L.L.C.



Principal Place of Business Mailing Address
 1231 CAPE CORAL PARKWAY, SUITE #8A 1231 CAPE CORAL PARKWAY, SUITE #8A
 CAPE CORAL, FL 33904 CAPE CORAL, FL 33904

DO NOT WRITE IN THIS SPACE



04142005No Chg-LLC CR2E083 (10/03)

4. FEI Number 54-2094883	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent
 DENTI, KEVIN A ESQUIRE
 CHEFFY, PASSIDOMO, WILSON & JOHNSON, LLP
 821 FIFTH AVENUE SOUTH, SUITE #201
 NAPLES, FL 34102

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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

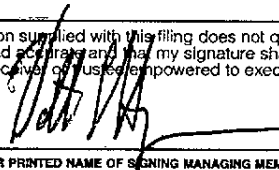
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HAGENBUCKLE, WALTER S 1231 CAPE CORAL PARKWAY, SUITE #8A CAPE CORAL, FL 33904
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 04/18/05-80139-024 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  **4/15/05 239 542 9005**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #