


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000021391 1. Entity Name THE HEWITT FAMILY, L.L.C.	
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Principal Place of Business 1411 EDGEWATER DR. ORLANDO, FL 32804	Mailing Address 1411 EDGEWATER DR. ORLANDO, FL 32804
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DO NOT WRITE IN THIS SPACE



03072007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1204284	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**HEWITT, ROBERT C
1411 EDGEWATER DR.
ORLANDO, FL 32804**

**DO NOT WRITE
IN THIS SPACE**

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 _____

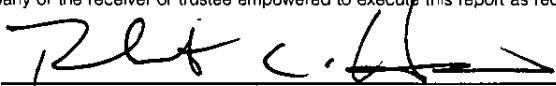
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HEWITT, ROBERT C 1411 EDGEWATER DR. ORLANDO, FL 32804
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04/29/07-80001-009 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **3/8/07 407-447-4774**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #