

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000030051

1. Entity Name
THE HEAVENER COMPANY EDUCATION WEST II, LLC



Principal Place of Business
3300 UNIVERSITY BLVD, STE. 218
WINTER PARK, FL 32792

Mailing Address
3300 UNIVERSITY BLVD, STE. 218
WINTER PARK, FL 32792

DO NOT WRITE IN THIS SPACE



03132006No Chg-LLC

CR2E083 (11/05)

4. FFI Number

☐ **Applied For**
☐ **Not Applicable**

5. Certificate of Status Desired

☐ **\$5.00 Additional**
Fee Required

6. Name and Address of Current Registered Agent

HEEKIN, JAMES F JR.
215 NORTH EOLA DR
ORLANDO, FL 32801

**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

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

U000000496414
04/22/06-80012-015 50.00

9. MANAGING MEMBERS/MANAGERS

| | |
|------------------------|----------------------------------|
| TITLE | MGRM |
| NAME | HEAVENER, JAMES W |
| STREET ADDRESS | 3300 UNIVERSITY BLVD #218 |
| CITY - ST - ZIP | WINTER PARK, FL 32792 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
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| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

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IN THIS SPACE**

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:

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

Date

Daytime Phone #

4-1-06