2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000030051

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



FILED Mar 10, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

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



DO NOT WRITE IN THIS SPACE

02122008No Chg-LLC CR2E083 (12/07)

4. FEI 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

	,	IN	THIS SPACE
6. The above the obligat	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title it applicable,	(NOTE: Registered Agent signature regulated when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	HEAVENER, JAMES W	•	
STREET ADDRESS	3300 UNIVERSITY BLVD #218	i	
CITY-ST-ZIP	WINTER PARK, FL 32792		HANNING AMERICAN
TITLE			U00000851338
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MANAGE			

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 1 am a managing member or manager of the limited liability company on the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

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

3/5/08

Daytime Phone #