2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# L03000036017

Entity Name: HERITAGE ACADEMY, LLC

Current Principal Place of Business:

3324 N. MONROE ST.
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

3324 N. MONROE ST.
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLEN, PHIL
3508 CARRINGTON DR.
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: ALLEN, PHIL
Address: 3508 CARRINGTON DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGR ( ) Delete
Name: ITELLI, NANCY TRIPP
Address: 5241 WATER VALLEY DR.
City-St-Zip: TALLAHASSE, FL

Title: MGRM ( ) Delete
Name: HORAHAN, MARILYN
Address: 4295 COOL EMERALD DR.
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PHIL ALLEN DIR. 07/01/2004

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