


2004
LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L03000045212	
1. Entity Name Douglas J. Heidenreich LLC	

FILED
2004 JAN -6 AM 11:55
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4012 5th St West	3. Mailing Address 4012 5th St West
Suite, Apt. #, etc.	Suite, Apt. #, etc.

100026112901
 01/06/04--01017--012 **55.00

DO NOT WRITE IN THIS SPACE

City & State Lehigh Acres, FL	City & State Lehigh Acres, FL	4. FEI Number 52-2414554	Applied For <input type="checkbox"/> Not Applicable
Zip 33971	Country USA	Zip 33971	Country USA
		5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name Douglas J. Heidenreich	
Street Address (P.O. Box Number is Not Acceptable) 4012 5th St. West	
Lehigh Acres, FL 33971	
City FL	Zip Code

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 Douglas J. Heidenreich <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE 1-1-04

FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1	
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9. MANAGING MEMBERS / MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Douglas J. Heidenreich 4012 5th St. West Lehigh Acres, FL 33971	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: Douglas J. Heidenreich	Date 1-1-04	Daytime Phone # 239-368-1564
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		

CR2E083B (12/02)