

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000021427

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** HERITAGE OAKS AT RENAISSANCE DEVELOPMENT, LLC

**Current Principal Place of Business:**

430 S. HARTSELL AVENUE  
LAKELAND, FL 33815

**New Principal Place of Business:**

430 HARTSELL AVENUE  
LAKELAND, FL 33815

**Current Mailing Address:**

430 S. HARTSELL AVENUE  
LAKELAND, FL 33815

**New Mailing Address:**

430 HARTSELL AVENUE  
LAKELAND, FL 33815

**FEI Number:** 20-4394980

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAXON, BERNICE S ESQ.  
201 EAST KENNEDY BLVD., SUITE 600  
TAMPA, FL 33602 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/MANAGERS:**

**Title:** MGRM  
**Name:** POLK COUNTY HOUSING DEVELOPERS, INC.  
**Address:** 430 HARTSELL AVENUE  
**City-St-Zip:** LAKELAND, FL 33815

**Title:** P  
**Name:** HERNANDEZ, HERB  
**Address:** 430 HARTSELL AVENUE  
**City-St-Zip:** LAKELAND, FL 33815 US

**Title:** VP  
**Name:** CALCAGNI, JOHN  
**Address:** 430 HARTSELL AVENUE  
**City-St-Zip:** LAKELAND, FL 33815 US

I hereby 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:** HERB HERNANDEZ

P

04/14/2011

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