## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000049856

Entity Name: HARDIN HERITAGE HOMES, LLC

**FILED** Apr 28, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2839 SW 35 ST 1819 NE 19 AVE

CAPE CORAL, FL 33914 CAPE CORAL, FL 33909

**Current Mailing Address: New Mailing Address:** 

2839 SW 35 ST 1819 NE 19 AVE

CAPE CORAL, FL 33914 CAPE CORAL, FL 33909

FEI Number: 20-1339399 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NICHOLS, JAMES L ESQ. 8191 COLLEGE PARKWAY SUITE 204 FORT MYERS, FL 33919 US

MANAGING MEMBERS/MANAGERS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change ( ) Addition () Delete

HARDIN, FRANZ A SR HARDIN, FRANZ A SR Name: Name: Address: 2839 SW 35 STREET Address: 1819 NE 19TH AVE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33909

Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition

Name: HARDIN, R KIM Name: HARDIN, R KIM Address: 2839 SW 35 ST Address: 1819 NE 19TH VE City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33909

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: R KIM HARDIN **MGRM** 04/28/2008