## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000061443

Address:

City-St-Zip:

Entity Name: HIGGINSON HOLDINGS, LLC

FILED Jan 05, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 27171 SUN AQUA LANE BONITA SPRINGS, FL 34135 **Current Mailing Address: New Mailing Address:** 27171 SUN AQUA LANE BONITA SPRINGS, FL 34135 FEI Number: 22-3903228 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: DYER, LORI DYER, LORI G 27171 SUN AQUA LANE 27171 SUN AQUA LANE BONITA SPRINGS, FL 34135 US BONITA SPRINGS, FL 34135 US 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: LORI G. DYER 01/05/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete DYER, LORI Name: Name: 27171 SUN AQUA LANE Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: Title: Title: MGRM ( ) Change (X) Addition ( ) Delete Name: Name: GLAZIER, SHERI D Address: Address: 25460 STILLWELL PKWY City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34135 Title: () Delete Title: MGRM ( ) Change (X) Addition HIGGINSON, PATRICK R Name: Name: 23220 RUNNING DEER TRAIL Address: Address: City-St-Zip: City-St-Zip: **EDMOND, OK 73003** ( ) Change (X) Addition Title: () Delete Title: MGRM Name: Name: HIGGINSON, MARK A Address: Address: 10881 ORANGEWOOD DR City-St-Zip: City-St-Zip: BONITA SPRINGS, FL 34135 Title: () Delete Title: MGRM ( ) Change (X) Addition HIGGINSON, KEVIN L Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

1654 BRAMAN AVE

FORT MYERS, FL 33901

SIGNATURE: LORI G. DYER MGR 01/05/2007