

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068536

FILED
Jul 12, 2005
Secretary of State

Entity Name: HERON'S WALK, LLC

Current Principal Place of Business:

2010 HIGHWAY C-30
PORT ST. JOE, FL 32456 US

New Principal Place of Business:

252 MARINA DRIVE
PORT ST. JOE, FL 32456 US

Current Mailing Address:

2010 HIGHWAY C-30
PORT ST. JOE, FL 32456 US

New Mailing Address:

252 MARINA DRIVE
PORT ST. JOE, FL 32456 US

FEI Number: 05-0611819 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GROOM, PAUL W II
206 E. FOURTH STREET
PORT ST. JOE, FL 32456 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: MGR () Delete
Name: RISH, WILLIAM J JR.
Address: 2010 HIGHWAY C-30
City-St-Zip: PORT ST. JOE, FL 32456 US

Title: MGR () Delete
Name: RISH, RALPH P
Address: 450 BLAKE DRIVE
City-St-Zip: WEWAHITCHKA, FL 32465

ADDITIONS/CHANGES:

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: WILLIAM J. RISH, JR.

MGR

07/12/2005

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