2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000078743

1. Entity Name

THE HEAVENER COMPANY 6363, LLC



Principal Place of Business

3300 UNIVERSITY BOULEVARD, SUITE 218 WINTER PARK, FL 32792

Mailing Address

3300 UNIVERSITY BOULEVARD, SUITE 218 WINTER PARK, FL 32792

FILED Apr 20, 2007 08:00 A Secretary of State



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04042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HEEKIN, JAMES F JR 215 NORTH EOLA DRIVE ORLANDO, FL 32801

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| 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.

Signature, typed or printed name of registered agent and title if applicable

(NOTE; Registered Agent signature required when reinstating)

DATE

Filing Fee Is \$50.00 Due by May 1, 2007

| 9. | MANAGING MEMBERS/MANAGERS |
|---------------------------------------|---|
| TITLE NAME STREET ADDRESS GITY-ST-ZIP | MGRM HEAVENER, JAMES W 3300 UNIVERSITY BLVD #218 WINTER PARK, FL 32792 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | the state information and lead with this filling does not qualify for the |

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/4/07

Daytime Phone #