2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2006
Secretary of State

DOCUMENT# L04000091639

Entity Name: HERITAGE BUSINESS CENTER, LC

Current Principal Place of Business:

975 E. MEMORIAL BOULEVARD
LAKELAND, FL 33801 US

New Principal Place of Business:

Current Mailing Address:

975 E MEMORIAL BOULEVARD
LAKELAND, FL 33801 US

New Mailing Address:

PO BOX 725589
ATLANTA, GA 31139 US

FEI Number: 20-2100332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WHITMAN, HOWE D
3067 GRASSLANDS DR.
LAKELAND, FL 33803 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:	WHITMAN, HOWE D	
Address:	3067 GRASSLANDS DR.	
City-St-Zip:	LAKELAND, FL 33803 US	
Title:	MGR	( ) Delete
Name:	WHITMAN, HOWE D JR.	
Address:	9 NELSON RIDGE RD.	
City-St-Zip:	PRINCETON, NJ 08540 US	
Title:	MGR	( ) Delete
Name:	RODDA, JOHN A	
Address:	2128 E. EDGEWOOD DR., SUITE 109	
City-St-Zip:	LAKELAND, FL 33803 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: HOWE D. WHITMAN MGR 03/27/2006

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