

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

1/18.

FILED
Feb 19, 2007 8:00 am
Secretary of State

01-18-2007 90018 013 ****55.00

DOCUMENT # L05000001350 1. Entity Name HEFTY PROPERTIES, L.L.C.	
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Principal Place of Business
**2530 CRAFTY CLINT LANE
HENDERSON, NV 89015**

Mailing Address
**2530 CRAFTY CLINT LANE
HENDERSON, NV 89015
P.O. Box 61377
BOULDER CITY, NV 89006**



DO NOT WRITE IN THIS SPACE

01102007No Chg-LLC

CR2ED83 (11/05)

4. FEI Number NOT APPLICABLE	Applied For ☐ Not Applicable ☒
5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**SMITH, G. THOMAS
510 EAST ZARAGOZA STREET
PENSACOLA, FL 32502**

**DO NOT WRITE
IN THIS SPACE**

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 CITY-ST-ZIP	MGRM CREATE-A-BOOK, INC. JOHN HEFTY 1232 PAULA CIRCLE 2530 CRAFTY CLINT LN GULF BREEZE, FL 32563 HENDERSON, NV 89002
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MGRM RITA HEFTY 2530 CRAFTY CLINT LN HENDERSON, NV 89002
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 liability company, or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

John B. Hefty

JOHN B. HEFTY

1-10-07

702-630-2764

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

Date

Daytime Phone #