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2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000022055

1. Entity Name

CITY-ST-7IP

HERON'S FOREST DEVELOPMENT COMPANY/L&R, L.L.C.



Principal Place of Business

17 SOUTH PALAFOX PLACE, SUITE 394 PENSACOLA, FL 32501

Mailing Address

17 SOUTH PALAFOX PLACE, SUITE 394 PENSACOLA, FL 32501

FILED Apr 13, 2007 8:00 am Secretary of State

04-13-2007 90043 029 ****50.00

60036203



04052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2468483

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BAKER, RICHARD R 17 SOUTH PALAFOX PLACE, SUITE 394 PENSACOLA, FL 32501

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		IN THIS SPACE
	named entity submits this statement for the purpose of chanions of registered agent.	ging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typod or printed name of registered agent and title if applicable,	(NOTE: Rogistered Agent signature required when reinstating) DATE
F.	iling Fee is \$50.00 ue by May 1, 2007	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BAKER, RICHARD R 84 BAYBRIDGE GULF BREEZE, FL 32561	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WALTON, GARRETT W 371 WOODBINE RD PENSACOLA, FL 32503	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST RIGBY, JENNIFER 178 OVERBOOK DR PENSACOLA, FL 32503	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEMON, MATT 2775 GRUNDY ST PENSACOLA, FL 32507	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	
TITLE NAME STREET ADDRESS		

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: SUCCESSION OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-10-07

850.434-5330

Daytime Phone 4