

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000024605

**FILED**  
**Jan 08, 2007**  
**Secretary of State**

**Entity Name:** JEFFREY HEACOCK PROPERTIES II, LLC

**Current Principal Place of Business:**

4510 ROBERT STREET  
COCOA, FL 32926 US

**New Principal Place of Business:**

1320 RIVERSIDE DR.  
TITUSVILLE, FL 32780 US

**Current Mailing Address:**

4510 ROBERT STREET  
COCOA, FL 32926 US

**New Mailing Address:**

1320 RIVERSIDE DR.  
TITUSVILLE, FL 32780 US

**FEI Number:** 20-2513318

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HEACOCK, JEFFREY A  
4510 ROBERT STREET  
COCOA, FL 32927 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: MGRM ( ) Delete  
Name: HEACOCK, JEFFREY A  
Address: 4510 ROBERT STREET  
City-St-Zip: COCOA, FL 32927 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MASCELLINO, TRACY L  
Address: 1320 RIVERSIDE DR.  
City-St-Zip: TITUSVILLE, FL 32780 US

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: TRACY L. MASCELLINO

MGRM

01/08/2007

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