

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000028719

Entity Name: HERITAGE FUNDING, LLC

FILED  
Apr 23, 2009  
Secretary of State

**Current Principal Place of Business:**

9799 OLD ST. AUGUSTINE ROAD  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

9799 OLD ST. AUGUSTINE ROAD  
JACKSONVILLE, FL 32257

**New Mailing Address:**

FEI Number: 20-2545282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRASER, THOMAS J  
240 PONTE VEDRA BEACH  
SUITE 150  
PONTE VEDRA BEACH, FL 32082 US

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

FRASER, THOMAS J  
4230 PABLO PROFESSIONAL COURT  
SUITE 200  
JACKSONVILLE, FL 32224 US

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

04/23/2009

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LEGRAND, RONALD F  
Address: 5490 GREELAND ROAD  
City-St-Zip: JACKSONVILLE, FL 32258

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RONALD LEGRAND

MGR

04/23/2009

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