

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037616

Entity Name: HEIR HOLDINGS, LLC

FILED
May 22, 2008
Secretary of State

Current Principal Place of Business:

2014 BRENTWOOD DRIVE
AUBURNDALE, FL 33823

New Principal Place of Business:

Current Mailing Address:

2014 BRENTWOOD DRIVE
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 52-2457265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TURI, CHARLEEN
2014 BRENTWOOD DR
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

TURI - KING, CHARLEEN
2014 BRENTWOOD DR
AUBURNDALE, FL 33823 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: CHARLEEN TURI KING

05/22/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KING, CHARLEEN
Address: 2014 BRENTWOOD DRIVE
City-St-Zip: AUBURNDALE, FL 33823

Title: MGRM () Delete
Name: RICE, JAMES
Address: 2014 BRENTWOOD DR
City-St-Zip: AUBURNDALE, FL 33823

Title: MGRM () Delete
Name: LEMASTER, ANTHONY
Address: 2014 BRENTWOOD DRIVE
City-St-Zip: AUBURNDALE, FL 33823

Title: MGRM () Delete
Name: FOLKERTS, JANET
Address: 2014 BRENTWOOD DRIVE
City-St-Zip: AUBURNDALE, FL 33823

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:

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: CHARLEEN KING

MGR

05/22/2008

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