

# **2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000046043

**FILED**  
**Feb 25, 2008**  
**Secretary of State**

**Entity Name:** HERON BAY EXECUTIVE CENTER, L.L.C.

**Current Principal Place of Business:**

10142 NW 50 STREET  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

10142 NW 50 STREET  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:** 20-2855882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRUBER, PETER G ESQ.  
9100 SOUTH DADELAND BLVD.  
ONE DATRAN CENTER SUITE 910  
MIAMI, FL 33156 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:** MGR ( ) Delete  
**Name:** LOPEZ, CARY O  
**Address:** 10142 N.W. 50 STREET  
**City-St-Zip:** SUNRISE, FL 33351

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** LOPEZ MANAGEMENT TRU, ST  
**Address:** 10142 N.W. 50 STREET  
**City-St-Zip:** SUNRISE, FL 33351

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:** C. LOPEZ

MGR

02/25/2008

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