


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000077414 1. Entity Name BLUE HERON PARK DEVELOPMENT, LLC	
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Principal Place of Business 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609 US	Mailing Address 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609 US
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DO NOT WRITE IN THIS SPACE



03132007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-3261178	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent DARREY, SR, JEFFREY A 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

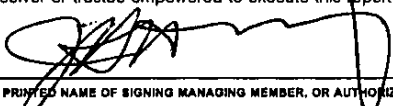
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DARREY, SR, JEFFREY A 5003 SHORE CREST CIRCLE SOUTH TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DARREY, JR, JEFFREY A 17814 SIMMS ROAD ODESSA, FL 33556
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

04/09/07-60021-011 50.00

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: X  X X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #