


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 12, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000094470 1. Entity Name WILLIAM HEATON RECORDS, LLC	
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Principal Place of Business 23123 STATE ROAD 7 SUITE 305B BOCA RATON, FL 33428	Mailing Address 23123 STATE ROAD 7 SUITE 305B BOCA RATON, FL 33428
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03082007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3545726	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 HEATON, BILL R 23123 STATE ROAD 7 SUITE 305B BOCA RATON, FL 33428

**DO NOT WRITE
IN THIS SPACE**

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  3-8-2007
Signature, typed or printed name of registered agent and title if applicable. (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	PRES HEATON, BILL R 23123 STATE ROAD 7, STE. 305B BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MORIARTY, ROLAND T 23123 STATE ROAD 7, STE. 305B BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. HEATON, BEVERLY D 23123 STATE ROAD 7, STE. 305B BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA MORIARTY, MARISA M 23123 STATE RD., STE 305B BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP2 HEATON, BRADLEY S 23123 STATE ROAD, STE. 305B BOCA RATON, FL 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000662939
03/21/07-80032-016 50.00

**DO NOT WRITE
IN THIS SPACE**

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:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3-8-2007 561-364-2964