

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097746

FILED
Jul 11, 2006
Secretary of State

Entity Name: HERMAN PROPERTIES LLC

Current Principal Place of Business:

11026 SUMMERSPRING LAKE DR
ORLANDO, FL 32825

New Principal Place of Business:

4401 EAST COLONIAL DR, STE 107
SUITE 107
ORLANDO, FL 32803

Current Mailing Address:

11026 SUMMERSPRING LAKE DR
ORLANDO, FL 32825 US

New Mailing Address:

4401 EAST COLONIAL DRIVE
SUITE 107
ORLANDO, FL 32803 US

FEI Number: 42-1680466 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:

HERMAN, JEFFREY
11026 SUMMERSPRING LAKE DR
ORLANDO, FL 32825 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: HERMAN, JEFFREY
Address: 11026 SUMMERSPRING LAKE DR
City-St-Zip: ORLANDO, FL 32825 US

Title: MGR () Delete
Name: HERMAN, MARY ANN
Address: 11026 SUMMERSPRING LAKE DR
City-St-Zip: ORLANDO, FL 32825 US

ADDITIONS/CHANGES:

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 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: JEFFREY HERMAN

PRES

07/11/2006

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