2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000110941

1. Entity Name

THE HEAVENER COMPANY LEASING, LLC



FILED Apr 20, 2007 08:00 Al Secretary of State

Principal Place of Business

3300 UNIVERSITY BLVD., SUITE 218 WINTER PARK, FL 32792

Malling Address

3300 UNIVERSITY BLVD., SUITE 218 WINTER PARK, FL 32792



DO NOT WRITE IN THIS SPACE

04042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HEEKIN, JAMES F JR. 215 NORTH EOLA DRIVE ORLANDO, FL 32801

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.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE; Registered Agent signature required when reinstating)	DATE
FI	lling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HEAVENER, JAMES W 3300 UNIVERSITY BLVD, # 218 WINTER PARK, FL 32792		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WINTER FAIR, LE 32/32		000000718722 05/01/07-80034-005 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME			

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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

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

44107

Daytime Phone #