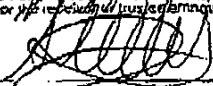


2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED

07 JUL -3 AM 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L06000009127					
1. Entity Name HERITAGE GREEN HOLDINGS, LLC					
Principal Place of Business 330 EAST CENTRAL BLVD. ORLANDO, FL 32801			Mailing Address 330 EAST CENTRAL BLVD. ORLANDO, FL 32801		
2. Principal Place of Business - No P.O. Box # 200 S. Orange Avenue			3. Mailing Address Suite, Apt. #, etc. Suite 2075		
City & State Orlando, FL			City & State Orlando, FL		
Zip 32801	Country USA	Zip 32801	Country USA	4. FEI Number 13-4325064	
5. Certificate of Status Desired ☐ \$5.00 Annual Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent CORPORATION COMPANY OF ORLANDO 300 SOUTH ORANGE AVE., SUITE 1000 (BMJ) ORLANDO, FL 32801-5403			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 re-registering) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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 responsible individual designated to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 			4/20/07 407-377-0555		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

