2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2007
Secretary of State

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Entity Name: TWO HEARTS, LLC

Current Principal Place of Business:

678 WHITEMARSH AVENUE
DELTONA, FL 32725 US

New Principal Place of Business:

1513 E SILVER HAMMOCK
DELAND, FL 32720 US

Current Mailing Address:

678 WHITEMARSH AVENUE
DELTONA, FL 32725 US

New Mailing Address:

1513 E SILVER HAMMOCK
DELAND, FL 32720 US

FEI Number: 20-8931102 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIDGWAY, JENNY O
678 WHITEMARSH AVENUE
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

RIDGWAY, JENNY O
1513 E SILVER HAMMOCK
DELAND, FL 32720 US

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: JENNY O. RIDGWAY 04/28/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: RIDGWAY, JENNY O
Address: 678 WHITEMARSH AVENUE
City-St-Zip: DELTONA, FL 32725 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: RIDGWAY, JENNY O
Address: 1513 E SILVER HAMMOCK
City-St-Zip: DELAND, FL 32720 US

Title: MGRM ( ) Change (X) Addition
Name: OSTERHOUT, JESSICA M
Address: 1933 LADY BUG LANE
City-St-Zip: DELAND, FL 32720 US

I hereby certify that the information supplied with this filing does not qualify 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: JENNY O RIDGWAY MGRM 04/28/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date