

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075152

FILED  
Jan 27, 2008  
Secretary of State

Entity Name: ALMOST HEAVEN PROPERTIES, LLC

**Current Principal Place of Business:**

270 RICHLAND AVE.  
MERRITT ISLAND, FL 32953 US

**New Principal Place of Business:**

**Current Mailing Address:**

270 RICHLAND AVE.  
MERRITT ISLAND, FL 32953 US

**New Mailing Address:**

304 COUNTY RD 514  
TRINITY, AL 35673 US

FEI Number: 20-5310931

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REID, ERIC M  
1915 LAZY LN  
COCOA, FL 32926 US

**Name and Address of New Registered Agent:**

DIEDRICH, RICHARD C  
270 RICHLAND AVE  
MERRITT ISLAND, FL 32953 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: RICHARD C DIEDRICH

01/27/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: REID, ERIC M  
Address: 1915 LAZY LANE  
City-St-Zip: COCOA, FL 32926 US

Title: MGR ( ) Delete  
Name: DIEDRICH, RICHARD C  
Address: 270 RICHLAND AVENUE  
City-St-Zip: MERRITT ISLAND, FL 32953 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: REID, ERIC M  
Address: 304 COUNTY RD 514  
City-St-Zip: TRINITY, AL 35673 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ERIC M REID

MGR

01/27/2008

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