

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000114418

FILED  
Jan 23, 2008  
Secretary of State

Entity Name: HEATH RADLEY LLC

**Current Principal Place of Business:**

7124 KENDALL HEATH WAY  
LAND O' LAKES, FL 34637 US

**New Principal Place of Business:**

**Current Mailing Address:**

7124 KENDALL HEATH WAY  
LAND O' LAKES, FL 34637 US

**New Mailing Address:**

FEI Number: 26-1393075

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GREENE, ELLIOT  
5511 UNIVERSITY DRIVE  
SUITE 102  
CORAL SPRINGS, FL 33067 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: HEATH, DIANE  
Address: 7124 KENDALL HEATH WAY  
City-St-Zip: LAND O' LAKES, FL 34637 US

Title: MGR ( ) Delete  
Name: RADLEY, KIRST JANE  
Address: 7124 KENDALL HEATH WAY  
City-St-Zip: LAND O' LAKES, FL 34637 US

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: RADLEY, KIRSTY JANE  
Address: 7124 KENDALL HEATH WAY  
City-St-Zip: LAND O' LAKES, FL 34637 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: KIRSTY JANE RADLEY

MS

01/23/2008

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