

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016884

Entity Name: HERITAGE SERVICES, LLC

FILED  
Jan 06, 2009  
Secretary of State

**Current Principal Place of Business:**

10950 NW 5TH AVE  
BRANFORD, FL 32008

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1484  
BRANFORD, FL 32008

**New Mailing Address:**

FEI Number: 26-2008769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FOREMAN, JOEL F  
492 W. DUVAL STREET  
LAKE CITY, FL 32055 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: MGRM ( ) Delete  
Name: SMITH, JOHNNY C  
Address: PO BOX 1484  
City-St-Zip: BRANFORD, FL 32008 US

Title: MGRM ( ) Delete  
Name: DIXON, VIRGINIA A  
Address: PO BOX 1484  
City-St-Zip: BRANFORD, FL 32008 US

**ADDITIONS/CHANGES:**

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

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: JOHNNY C. SMITH

MGRM

01/06/2009

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