

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000047053

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** HEART FOR ART WEST PALM BEACH LLC

**Current Principal Place of Business:**

14352 HORSESHOE TRACE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

14352 HORSESHOE TRACE  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 38-3795569

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

ERICKSON, GAIL  
14352 HORSESHOE TRACE  
WPB, FL 33414 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:** GAIL ERICKSON

01/06/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** ERICKSON, GAIL  
**Address:** 14352 HORSESHOE TRACE  
**City-St-Zip:** WELLINGTON, FL 33414

**Title:** S  
**Name:** ERICKSON, GAIL  
**Address:** 14352 HORSESHOE TRACE  
**City-St-Zip:** WELLINGTON, FL 33414

I hereby 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:** GAIL ERICKSON

MGR

01/06/2010

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