

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000013995

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** HAVE HEART, LLC

**Current Principal Place of Business:**

390 N ORANGE AVE  
STE 1400  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

390 N ORANGE AVE  
STE 1400  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SCHANN, PETER  
6932 SYLVAN WOODS DRIVE  
SANFORD, FL 32771 US

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

SCHOEMANN, PETER  
6932 SYLVAN WOODS DRIVE  
SANFORD, FL 32771 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: PETER SCHOEMANN

01/05/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ECKSTEIN, PATRICIA  
Address: 6939 SYLVAN WOODS DRIVE  
City-St-Zip: SANFORD, FL 32771

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: PATRICIA ECKSTEIN

MGR

01/05/2011

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