2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # M03000003373

MHC HERITAGE PLANTATION, L.L.C.



Secretary of State 03-09-2004 90291 026 ****50.00

FILED

Mar 09, 2004 8:00 am

Principal Place of Business

Mailing Address

TWO NORTH RIVERSIDE PLAZA, SUITE 800 CHICAGO, IL 60606

TWO NORTH RIVERSIDE PLAZA, SUITE 800 CHICAGO, IL 60606



01142004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number Applied For 38-3689610 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

02/11/04

312/279-1400

Daytime Phone #

8. The above the obligat	named entity submits this statement for the purpose of char lions of registered agent.	nging its registere	d office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required when reinstating)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2004			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MHC OPERATING LIMITED PARTNERSHIP TWO NORTH RIVERSIDE PLAZA, SUITE 800 CHICAGO, IL 60606			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Ç.	DO NO	T WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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.				

David W. Fell, Vice President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE