

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000002773

Entity Name: HEARTLAND FLORIDA, LLC

**FILED**  
**Jan 31, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

1803 N. COLLEGE AVE.  
BLOOMINGTON, IN 47402

**New Principal Place of Business:**

**Current Mailing Address:**

1803 N. COLLEGE AVE.  
BLOOMINGTON, IN 47402

**New Mailing Address:**

FEI Number: 35-2092717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BROWNE, ADRIENNE E  
4415 SOUTH WEST 34TH STREET #601  
GAINESVILLE, FL 32608 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: HUSE, STEPHEN M  
Address: 1803 N. COLLEGE AVE.  
City-St-Zip: BLOOMINGTON, IN 47402

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEPHEN M. HUSE

MGR

01/31/2005

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