


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb-21, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000015943
 1. Entity Name
 HOLLAND DRIVE, LLC



Principal Place of Business: 4001 TAMiami TRAIL NORTH, SUITE 350, NAPLES, FL 34103
 Mailing Address: 4001 TAMiami TRAIL NORTH, SUITE 350, NAPLES, FL 34103

DO NOT WRITE IN THIS SPACE



01032005No Chg-LLC CR2E083 (10/03)
 4. FEI Number: 37-1227988 Applied For: Not Applicable
 5. Certificate of Status Desired: \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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 I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	TCL REALTY, INC.
STREET ADDRESS	4001 TAMiami TRAIL N, SUITE 350
CITY-ST-ZIP	NAPLES, FL 34103
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 02/22/05-80029-001 200.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.
 SIGNATURE: Michael Amis 1-6-05
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #