

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000007444

**Entity Name:** AMERICAN DREAMS REALTY, LLC

**Current Principal Place of Business:**

2632 NW 43RD ST  
SUITE B2182  
GAINESVILLE, FL 32606

**Current Mailing Address:**

PO BOX 357782  
GAINESVILLE, FL 32635 US

**FEI Number:** 30-0300827

**Certificate of Status Desired:** No

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

INTHAVONG HOLMES, CHRISTINA  
2632 NW 43RD ST  
SUITE B2182  
GAINESVILLE, FL 32606 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name INTHAVONG HOLMES, CHRISTINA  
Address PO BOX 357782  
City-State-Zip: GAINESVILLE FL 32635

Title MGR  
Name HOLMES, DALE A  
Address PO BOX 357782  
City-State-Zip: GAINESVILLE FL 32635

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHRISTINA INTHAVONG HOLMES

**MGRM**

**01/30/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date