

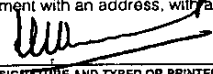


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90317 018 \*\*\*150.00

<b>DOCUMENT # 571078</b> 1. Entity Name <b>HOLLAND-AMERICA INVESTMENTS CORPORATION</b>					
Principal Place of Business <b>606 BALD EAGLE DRIVE, SUITE 500 P. O. BOX ONE MARCO ISLAND, FL 33937</b>			Mailing Address <b>P. O. BOX ONE MARCO ISLAND, FL 33937 US</b>		
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip      Country		3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip      Country			
4. FEI Number <b>59-1828815</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>WOODWARD, CRAIG, R., ESQUIRE 606 BALD EAGLE DR., SUITE 500 ISLAND TOWER BUILDING MARCO ISLAND, FL 33937</b>			7. Name and Address of New Registered Agent: Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>KUPERUS, HARRY</b> <b>EMMALAAN 29, 5751 JP</b> <b>DEURNE,</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>ERMERweg 127</b> <b>7812 BD EMMEN</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>KUPERUS, ADRIANA.</b> <b>EMMALAAN 29, 5751 JP</b> <b>DEURNE,</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>ERMERweg 127</b> <b>7812 BD EMMEN</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>KUPERUS, JERRY</b> <b>EMMALAAN 29, 5751 JP</b> <b>DEURNE,</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>ERMERweg 127</b> <b>7812 BD EMMEN</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  (Jerry Kuperus)			Date: <b>March 23, 2006</b> Daytime Phone #		

ATTACHMENT



WOODWARD, PIRES & LOMBARDO, P.A.  
Attorneys - At - Law

60025202

#5-71078

March 29, 2006

CRAIG R. WOODWARD ●  
MARK J. WOODWARD  
ANTHONY P. PIRES, JR. ■  
J. CHRISTOPHER LOMBARDO  
STEVEN V. BLOUNT

CARRIE E. LADEMAN

BURT L. SAUNDERS  
ELIZABETH J. VAN ARSDALE ▲  
OF COUNSEL

● (Board Certified Real Estate Attorney)  
■ (Board Certified City, County and Local Government Attorney)  
▲ (Certified Circuit Civil Mediator)  
▲ (Certified Family Law Mediator)  
▲ (Also Admitted in Iowa)

Florida Department of State  
Division of Corporations  
P.O. Box 6198  
Tallahassee, Florida 32314

Re: Holland-America Investments Corporation

Dear Ladies:

Enclosed please find the 2006 Annual Report as completed for Holland-America Investments Corporation. Also enclosed is a check in the amount of \$150.00 payable to the Florida Department of State which represents the fee to file this annual report.

If you have any questions, please contact me.

Sincerely yours,

  
Craig R. Woodward

CRW/tl  
Enclosure

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