2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L00000015943

1. Entity Name
HOLLAND DRIVE, LLC

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

DO NOT WRITE IN THIS SPACE

01032005No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
37-1227988	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

DO NOT WRITE IN THIS SPACE

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

Signature, typed or printed name of registered agent and title if applicable   (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

U00000239187
02/22/05-80029-001 200.00

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

SIGNATURE: _____   1-6-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #