

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L01000007651

1. Entity Name  
HOLLAND MANAGEMENT, LLC



Principal Place of Business  
10395 STATE ROAD 60  
VERO BEACH, FL 32966

Mailing Address  
10395 STATE ROAD 60  
VERO BEACH, FL 32966

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent -

VITELLO, PHILIP E  
662 AZALEA LANE  
VERO BEACH, FL 32963

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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	HOLLAND, BEAU W
STREET ADDRESS	10395 STATE ROAD 60
CITY-ST-ZIP	VERO BEACH, FL 32966

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED  
Apr 20, 2006 8:00 am  
Secretary of State**

04-20-2006 90152 001 \*\*\*150.00

**30005610**



04122006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 26-7675824	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$5.00 Additional Fee Required

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IN THIS SPACE**

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IN THIS SPACE**

*4/6-0*

Date

Daytime Phone #