

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000034326

FILED
Aug 20, 2007
Secretary of State

Entity Name: HOLIDAY VENTURES, L.C.

Current Principal Place of Business:

2293 WEST EAU GALLIE BLVD.
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

2293 WEST EAU GALLIE BLVD.
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 20-0196364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRNES, KATHRYN
2293 WEST EAU GALLIE BLVD.
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

SHELPMAN, KIM
2293 WEST EAU GALLIE BLVD.
MELBOURNE, FL 32935 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: KIM SHELPMAN

08/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOLIDAY BUILDERS CON, STRUCTION, INC .
Address: 2293 WEST EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: BONNIE DOSS

ST

08/20/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date