## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014226

**Entity Name:** HOLLINGSWORTH FACTORS LLC

FILED Jan 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5201 ATLANTIC BLVD. #292 8730 MATHONIA AVE

JACKSONVILLE, FL 32207 US JACKSONVILLE, FL 32211 US

Current Mailing Address: New Mailing Address:

5201 ATLANTIC BLVD. #292 8730 MATHONIA AVE JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32211

FEI Number: 01-0852603 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HOLLINGSWORTH, JULIE N
5201 ATLANTIC BLVD.

JACKSONVILLE, FL 32207 US

HOLLINGSWORTH, JULIE
8730 MATHONIA AVE
JACKSONVILLE, FL 32211 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: JULIE HOLLINGSWORTH 01/17/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 HOLLINGWORTH, JULIE
 Name:
 SEWELL, ELIZABETH

 Address:
 5201 ATLANTIC BLVD. #292
 Address:
 8509 ALTON AVE

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32211

I hereby certify that the information supplied with this filing does not qualify for the 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: ELIZABETH SEWELL MGR 01/17/2006