

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032237

FILED  
Feb 08, 2005  
Secretary of State

**Entity Name:** HOLLOWAY IRRIGATION SYSTEMS, LLC

**Current Principal Place of Business:**

2620 GRIFFIN RD  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

2620 GRIFFIN RD  
LEESBURG, FL 34748

**New Mailing Address:**

201 N. WYMORE RD  
WINTER PARK, FL 32789 US

**FEI Number:** 20-1168896

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLLOWAY, RUFUS M JR  
2620 GRIFFIN RD  
LEESBURG, FL 34748 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: COLE, CAROLYN A  
Address: 201 N. WYMORE AVE.  
City-St-Zip: WINTER PARK, FL 32789 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CAROLYN ANN COLE

MGR

02/08/2005

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