


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90346 008 ****50.00

DOCUMENT # L04000034391

1. Entity Name
HOLLYWOOD INVESTMENTS, LLC



Principal Place of Business
2809 MILTON HIGHWAY
RINGGOLD, VA 24586 US

Mailing Address
2028 PIERCE STREET
HOLLYWOOD, FL 32020 US

Hollywood # 2028 # 202

2. Principal Place of Business - No P.O. Box #
815 N. NorthLake Dr.

3. Mailing Address
815 N. NorthLake Dr.

Suite, Apt. #, etc.



04112007 Chg-LLC CR2E083 (12/06)

City & State
Hollywood, FL

City & State
Hollywood, FL

Zip
33019

Country
US

4. FEI Number
20-1085428

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HARTE, GREG
2028 PIERCE STREET
HOLLYWOOD, FL 33020

7. Name and Address of New Registered Agent

Name **Richard V. Carlton**

Street Address (P.O. Box Number is Not Acceptable)
815 N. NorthLake Dr.

City **Hollywood** State **FL** Zip Code **33019**

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 *Richard V. Carlton* DATE **4-11-07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARLTON, RICHARD 2809 MILTON HIGHWAY RINGGOLD, VA 24586 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITTLE, MADISON 2809 MILTON HIGHWAY RINGGOLD, VA 24586 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Carlton, Richard 815 N. NorthLake Dr. Hollywood, FL 33019 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Whittle, Madison 815 N. NorthLake Dr. Hollywood, FL 33019 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Richard V. Carlton* DATE: **4-11-07** DAYTIME PHONE #: **434-251-5697**

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