


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90331 044 ****50.00

DOCUMENT # L04000039140 1. Entity Name PLATINUM HOLDINGS 2004, LLC					
Principal Place of Business 6201 MATCHETT ROAD ORLANDO, FL 32809			Mailing Address 6201 MATCHETT ROAD ORLANDO, FL 32809		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 26-6826176	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLLOWAY, JOHN W 6201 MATCHETT ROAD ORLANDO, FL 32809			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOLLOWAY, JOHN W 6201 MATCHETT ROAD ORLANDO, FL 32809	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Bank of America NA, Trustee 390 N. Orange Ave, Ste 700 Orlando, Florida 32801	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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04302007 Chg-LLC CR2E083 (12/06)

4. FEI Number
26-6826176

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

**HOLLOWAY, JOHN W
6201 MATCHETT ROAD
ORLANDO, FL 32809**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**MGR
HOLLOWAY, JOHN W
6201 MATCHETT ROAD
ORLANDO, FL 32809**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**MGR
Bank of America NA, Trustee
390 N. Orange Ave, Ste 700
Orlando, Florida 32801**

☒ Change ☐ Addition

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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: by: *Rebecca M. Dice* **Rebecca M. Dice**

4/30/07 407-244-7063

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

Date

Daytime Phone #