

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000089618

Entity Name: HOLIDAY PROPERTY LLC

**FILED**  
**Feb 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4340 FLORA AVE  
HOLIDAY, FL 34691

**New Principal Place of Business:**

4349 LOUIS AVE  
HOLIDAY, FL 34691

**Current Mailing Address:**

4340 FLORA AVE  
HOLIDAY, FL 34691

**New Mailing Address:**

4349 LOUIS AVE  
HOLIDAY, FL 34691

FEI Number: 20-1996516

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HENSLEY, RENE M  
4340 FLORA AVE  
HOLIDAY, FL 34691 US

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

HENSLEY, RENE M  
4349 LOUIS AVE  
HOLIDAY, FL 34691 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: RENE M HENSLEY

02/06/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HENSLEY, EDWARD D  
Address: 4349 LOUIS AVE  
City-St-Zip: HOLIDAY, FL 34691

Title: MGRM  
Name: HENSLEY, RENE M  
Address: 4349 LOUIS AVE  
City-St-Zip: HOLIDAY, FL 34691

I hereby 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: EDWARD D HENSLEY

MGRM

02/06/2011

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