

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000004503

FILED
Apr 19, 2009
Secretary of State

Entity Name: HOLEON MANAGEMENT, LLC

Current Principal Place of Business:

1574 VISCAYA DRIVE
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

1574 VISCAYA DRIVE
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 20-2158650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEROY, H. JAMES
1574 VISCAYA DRIVE
PORT CHARLOTTE, FL 33952 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/MANAGERS:

Title: MGR () Delete
Name: LEROY, H. JAMES
Address: 1574 VISCAYA DRIVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MGR () Delete
Name: LYON, GREGORY P
Address: 8284 HARBORSIDE CIRCLE
City-St-Zip: ENGLEWOOD, FL 34224

Title: MGR () Delete
Name: HOBBS, MICHAEL J
Address: 6 PEBBLE BEACH RD.
City-St-Zip: ROTONDA WEST, FL 33947

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: H. JAMES LEROY

MGR

04/19/2009

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