2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000013480

1. Entity Name SIMPLE HOLDINGS, LLC



FILED Feb 27, 2008 08:00 AN Secretary of State

Principal Place of Business

803B MANATEE AVE. W. BRADENTON, FL 34205 Mailing Address

P.O. BOX 713

BRADENTON, FL 34206



01282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2378806

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

VANDERNOORD, PETER MGR 1001 RIVERSIDE DR PALMETTO, FL 34221

DO NOT WRITE IN THIS SPACE

| 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. | | | | |
|--|--|----|---|--|
| SIGNATURB Signature, types or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating). DATE | | | | |
| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR VANDERNOORD, PETER 1001 RIVERSIDE DR PALMETTO, FL 34221 | | U00000841242 03/10/08-80009-013 138.75 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR DEJONG, MARK 803B MANATEE AVE. W. BRADENTON, FL 34206 | | 00. 10. 00 0000 010 100.10 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | DO NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | IN | IN THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | |
| 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 AND THE DOR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE