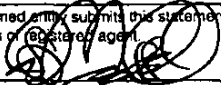
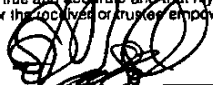


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

04-17-2006 90041 045 \*\*\*\*50.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 |                                                                                                                                                                                                                |                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # L05000057511</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                 |                                                                                                                               |                                                                   |
| 1. Entity Name<br><b>HOLLY HILL ROAD, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                 |                                                                                                                                                                                                                |                                                                   |
| Principal Place of Business<br><b>11507 NORTH SHORE GOLF CLUB BLVD.<br/>ORLANDO, FL 32832</b>                                                                                                                                                                                                                                                                                                                                                                                                              |                                 | Mailing Address<br><b>11507 NORTH SHORE GOLF CLUB BLVD.<br/>ORLANDO, FL 32832</b>                                                                                                                              |                                                                   |
| 2. Principal Place of Business<br><b>5511 HANSEL AVE.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 | 3. Mailing Address<br><b>5511 HANSEL AVE.</b>                                                                                                                                                                  |                                                                   |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 | Suite, Apt. #, etc.                                                                                                                                                                                            |                                                                   |
| City & State<br><b>ORLANDO, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 | City & State<br><b>ORLANDO, FL</b>                                                                                                                                                                             |                                                                   |
| Zip<br><b>32809</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Country<br><b>USA</b>           | Zip<br><b>32809</b>                                                                                                                                                                                            | Country<br><b>USA</b>                                             |
| 4. FEI Number<br><b>27-0124998</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                         |                                                                   |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 | \$5.00 Additional Fee Required                                                                                                                                                                                 |                                                                   |
| 6. Name and Address of Current Registered Agent<br><b>RUSSELL, DOUGLAS R<br/>11507 NORTH SHORE GOLF CLUB BLVD.<br/>ORLANDO, FL 32832</b>                                                                                                                                                                                                                                                                                                                                                                   |                                 | 7. Name and Address of New Registered Agent<br>Name <b>DOUGLAS R. RUSSELL</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>5511 HANSEL AVE.</b><br>City <b>ORLANDO</b> FL Zip Code <b>32809</b> |                                                                   |
| 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, the registered agent.                                                                                                                                                                                                                                                                         |                                 |                                                                                                                                                                                                                |                                                                   |
| SIGNATURE  <b>DOUGLAS R. RUSSELL</b>                                                                                                                                                                                                                                                                                                                                                                                     |                                 | DATE <b>4/10/06</b>                                                                                                                                                                                            |                                                                   |
| Filing Fee is \$50.00<br>Due by May 1, 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                 | Make check payable to<br>Florida Department of State                                                                                                                                                           |                                                                   |
| 9. MANAGING MEMBERS/MANAGERS                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | 10. ADDITIONS/CHANGES                                                                                                                                                                                          |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 | <b>MGRM<br/>DOUGLAS R. RUSSELL<br/>5511 HANSEL AVE.<br/>ORLANDO, FL 32809</b>                                                                                                                                  |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 | <b>MGRM<br/>ROBERT L. SECANT, III<br/>5511 HANSEL AVE.<br/>ORLANDO, FL 32809</b>                                                                                                                               |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 | <b>MGRM<br/>JAMES BOWD<br/>5511 HANSEL AVE.<br/>ORLANDO, FL 32809</b>                                                                                                                                          |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 | <b>MGRM<br/>MALCUS HOOKER<br/>5511 HANSEL AVE.<br/>ORLANDO, FL 32809</b>                                                                                                                                       |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 |                                                                                                                                                                                                                |                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                 |                                                                                                                                                                                                                |                                                                   |
| 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 authorized or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. |                                 |                                                                                                                                                                                                                |                                                                   |
| SIGNATURE:  <b>DOUGLAS R. RUSSELL</b>                                                                                                                                                                                                                                                                                                                                                                                   |                                 | DATE <b>4/10/06</b> DAYTIME PHONE # <b>707-509-8484</b>                                                                                                                                                        |                                                                   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                                                                                                                                                                                                |                                                                   |