

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062329

FILED
Jan 12, 2006
Secretary of State

Entity Name: SEVEN SPRINGS HOLDINGS, LLC

Current Principal Place of Business:

2151 MAIN STREET, SUITE A
SARASOTA, FL 34237

New Principal Place of Business:

2151 MAIN STREET
SARASOTA, FL 34237

Current Mailing Address:

2151 MAIN STREET, SUITE A
SARASOTA, FL 34237

New Mailing Address:

2151 MAIN STREET
SARASOTA, FL 34237

FEI Number: 20-3330237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURNER, JAMES L
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: BURKS, RONALD H
Address: 2151 MAIN STREET
City-St-Zip: SARASOTA, FL 34237

Title: MGR () Change (X) Addition
Name: ZARRIS, ALEXANDER O
Address: 2151 MAIN STREET
City-St-Zip: SARASOTA, FL 34237

Title: MGRM () Change (X) Addition
Name: MELK, JOHN
Address: 2151 MAIN STREET
City-St-Zip: SARASOTA, FL 34237

I hereby certify that the information supplied with this filing does not qualify for the 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: RONALD H. BURKS

MGR

01/12/2006

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