## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000103989

Entity Name: HOLLOWAY WEALTH MANAGEMENT, LLC

FILED Apr 21, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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500 NW 43RD STREET, SUITE 3 GAINESVILLE, FL 32607

Current Mailing Address: New Mailing Address:

500 NW 43RD STREET, SUITE 3 GAINESVILLE, FL 32607

FEI Number: 20-3660467 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FOWLER WHITE BOGGS BANKER P.A. 50 NORTH LAURA STREET, SUITE 2200 ATTN: MICHAEL GOODBREAD JACKSONVILLE, FL 32202 US

500 NW 43RD STREET SUITE 3 GAINESVILLE, FL 32607 US

HOLLOWAY, CAROLINE J

, FL 32202 03 GAINESVILLE, FL 32007 03

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: CAROLINE J. HOLLOWAY 04/21/2006

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

 Title:
 ( ) Delete
 Title:
 PRES ( ) Change (X) Addition

 Name:
 Name:
 HOLLOWAY, SAMUEL N JR

 Address:
 Address:
 500 NW 43RD STREET, SUITE 3

 City-St-Zip:
 City-St-Zip:
 GAINESVILLE, FL 32607

Title: ( ) Delete Title: SEC ( ) Change (X) Addition Name: Name: HOLLOWAY, CAROLINE J Address: Address: Sity-St-Zip: GAINESVILLE, FL 32607

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: CAROLINE J HOLOWAY SEC 04/21/2006