

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000014686

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Entity Name:** FOUR JAYS HOLIDAYS, LLC.

**Current Principal Place of Business:**

240 SANDS POINT ROAD  
APT. 4201  
LONGBOAT KEY, FL 34228 US

**New Principal Place of Business:**

**Current Mailing Address:**

1990 MAIN STREET,  
SUITE 801  
SARASOTA, FL 34236 US

**New Mailing Address:**

**FEI Number:** 20-8648153

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GLENDINNING, RENE M CPA  
1990 MAIN STREET  
SUITE 801  
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: MGR  
Name: SHARMAN, JOHN C  
Address: 240 SANDS POINT ROAD, APT. 4201  
City-St-Zip: LONGBOAT KEY, FL 34228 FL

Title: MGR  
Name: SHARMAN, JACQUELINE  
Address: 240 SANDS POINT ROAD, APT. 4201  
City-St-Zip: LONGBOAT KEY, FL 34228 US

I hereby 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: JOHN SHARMAN

MGR

01/21/2010

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