## 2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L06000090988

Entity Name: PORT ORANGE HOLDINGS, LLC

FILED Oct 03, 2007 Secretary of State

Date

() Change () Addition

Current Principal Place of Business: New Principal Place of Business:

4315 METRO PARKWAY, SUITE 500 FT MYERS, FL 33916 US

Current Mailing Address: New Mailing Address:

Electronic Signature of Registered Agent

4315 METRO PARKWAY, SUITE 500 FT MYERS, FL 33916 US

FEI Number: 30-0384066 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:

NATIELLO, JOHN A 4315 METRO PARKWAY, SUITE 500 FT MYERS, FL 33916 US

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:

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

FT MYERS, FL 33916 US

FT MYERS, FL 33916 US

ROTH, JEFFREY H

() Delete

4315 METRO PARKWAY, SUITE 500

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HOLQUIST, LAURA Name: Name: 4315 METRO PARKWAY, SUITE 500 Address: Address: FT MYERS, FL 33916 US City-St-Zip: City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LIVINGSTON, WILLIAM I Name: Name: Address: ONE CORPORATE DR. SUITE 3A Address: City-St-Zip: PALM COAST, FL 32137 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition MCCURDY, CHRISTOPHER Name: Name: ONE CORPORATE DR, SUITE 3A Address: Address: City-St-Zip: PALM COAST, FL 31237 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: NATIELLO, JOHN Name: 4315 METRO PARKWAY, SUITE 500 Address: Address: City-St-Zip: FT MYERS, FL 33916 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HUGHES, HEIDI Name: Name: 4315 METRO PARKWAY, SUITE 500 Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN NATIELLO MGRM 10/03/2007