2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 18, 2009
Secretary of State

DOCUMENT# L07000031200

Entity Name: HOLLANDESIGN GROUP, LLC

Current Principal Place of Business:

6295 BAHIA DEL MAR SOUTH CIR.
#106M
SAINT PETERSBURG, FL 33715 US

New Principal Place of Business:

Current Mailing Address:

6295 BAHIA DEL MAR SOUTH CIR.
#106M
SAINT PETERSBURG, FL 33715 US

New Mailing Address:

FEI Number: 20-8746497 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HOLLAND, MICHAEL R MGRM
6295 BAHIA DEL MAR SOUTH CIR.
#106M
ST. PETERSBURG, FL 33715 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: MGRM ( ) Delete
Name: HOLLAND, MICHAEL R
Address: 6295 BAHIA DEL MAR SOUTH CIR. ,#106M
City-St-Zip: SAINT PETERSBURG, FL 33715 US

Title: MGRM ( ) Delete
Name: HOLLAND, MARGRETE
Address: 6295 BAHIA DEL MAR SOUTH CIR. #106M
City-St-Zip: SAINT PETERSBURG, FL 33715 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MICHAEL R. HOLLAND MGRM 06/18/2009

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