

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081996

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** AQUA VISTA OF PANAMA CITY, LLC

**Current Principal Place of Business:**

1020 ARTHUR DRIVE  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 16449  
PANAMA CITY, FL 32406

**New Mailing Address:**

FEI Number: 26-1085569

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOLLINGSWORTH, HARVEY  
308 BUNKERS COVE ROAD  
PANAMA CITY, FL 32401 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  
Name: HOLLINGSWORTH, HARVEY  
Address: 308 BUNKERS COVE ROAD  
City-St-Zip: PANAMA CITY, FL 32401

Title: MGRM  
Name: HOLLINGSWORTH, JO ANN  
Address: 308 BUNKERS COVE ROAD  
City-St-Zip: PANAMA CITY, FL 32401

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: HARVEY D HOLLINGSWORTH

MR

02/18/2010

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