

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000009718

FILED
Jan 17, 2012
Secretary of State

Entity Name: HALIFAX REAL ESTATE HOLDINGS, LLC

Current Principal Place of Business:

14500 DAFFODIL DR UNIT 1103
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

3030 DEVONSHIRE AVE
HALIFAX, NS B3K 3L9 CA

New Mailing Address:

110 GARLAND AVE
DARTMOUTH, NS B3B0A7 CA

FEI Number: 98-0648504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.
5125 ADANSON ST. SUITE 500
ORLANDO, FL 32804 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: WARD, GLEN
Address: 3030 DEVONSHIRE AVE
City-St-Zip: HALIFAX, NS B3K 3L9 CA

Title: MGRM
Name: COCHRANE, WAYNE
Address: 110 GARLAND AVE
City-St-Zip: DARTMOUTH, NS B3B 0A7 CA

Title: MGRM
Name: ELLEFSEN, JANS
Address: 274 CRAIGBURN DRIVE,
City-St-Zip: DARTMOUTH, NS B2X 3V7 CA

Title: MGRM
Name: HILCHIE, MARTIN
Address: 28 A MYRTLE ST
City-St-Zip: STRATFORD, PE C1B 2W2 CA

Title: MGRM
Name: SIDEBOTTOM, MARK
Address: 18 GRANDVIEW COURT
City-St-Zip: HAMMONDS PLAINS, NS B4B 1K6 CA

Title: MGRM
Name: HAMILTON, ROGER CARL
Address: 300 BELLBROOK CRESCENT
City-St-Zip: DARTMOUTH, NS B2W 0G3 CA

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: GLEN WARD

MGRM

01/17/2012

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