


FILED
Apr 26, 2007 8:00 am
Secretary of State

DOCUMENT # P05000101743			
1. Entity Name LIMES OF MANATEE, INC.			
Principal Place of Business 1725 E 8TH AVE-YBOR CITY TAMPA, FL 33605		Mailing Address 1725 E 8TH AVE-YBOR CITY TAMPA, FL 33605	
2. Principal Place of Business* - No P.O.-Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
5. Name and Address of Current Registered Agent			
HOLLAND, WILLIAM M JR 1725 E 8TH AVE-YBOR CITY TAMPA, FL 33605			Name
			Street Address
			City
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.			
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5 Ad	
10. OFFICERS AND DIRECTORS			
TITLE	P/D <input type="checkbox"/> Delete	11.	
NAME	HOLLAND, WILLIAM M JR.	TITLE	
STREET ADDRESS	228 WILLOWICK AVENUE	NAME	
CITY-ST-ZIP	TEMPLE TERRACE, FL 33617	STREET ADDRESS	
TITLE	S/D <input type="checkbox"/> Delete	TITLE	
NAME	HOLLAND, KATHERINE B	NAME	
STREET ADDRESS	228 WILLOWICK AVENUE	STREET ADDRESS	
CITY-ST-ZIP	TEMPLE TERRACE, FL 33617	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 601, changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>William M Holland Jr</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			