

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000040386

Entity Name: HOLMAN MANAGEMENT, INC.

FILED  
Jan 06, 2006  
Secretary of State

## Current Principal Place of Business:

950 CATTLEMEN ROAD  
SARASOTA, FL 34232

## New Principal Place of Business:

## Current Mailing Address:

950 CATTLEMEN ROAD  
SARASOTA, FL 34232

## New Mailing Address:

FEI Number: 65-0580008

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLMAN, D. SCOTT  
950 CATTLEMEN RD.  
SARASOTA, FL 34232 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HOLMAN, DENNIS  
Address: 7520 LEEWYNN DRIVE SOUTH  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete  
Name: HOLMAN, D. SCOTT  
Address: 4878 HUNTLEIGH DR  
City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete  
Name: HOLMAN, JEFFREY A  
Address: 2100 KINGSDOWN DRIVE  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete  
Name: HOLMAN, NORMA J  
Address: 346 N SHORE DR  
City-St-Zip: SARASOTA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: D. SCOTT HOLMAN

VP

01/06/2006

Electronic Signature of Signing Officer or Director

Date