that my name appears above, or on an attachment with all other like empowered. SIGNATURE: D. CRAIG HOLLIDAY	PRESIDENT	02/06/2025		
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 605, Florida Statutes; and				
I hereby certify that the information indicated on this report or supplemental report is true and accurate a				

SIGNATURE: D. CRAIG HOLLIDAY

Electronic Signature of Signing Authorized Person(s) Detail

**Current Mailing Address:** 1100 S TAMIAMI TRL, STE 302

Entity Name: HOLLIDAY GROUP, LLC

**Current Principal Place of Business:** 

SARASOTA, FL 34236 US

DOCUMENT# L07000120412

1100 S TAMIAMI TRL, STE 302 SARASOTA, FL 34236

## FEI Number: 26-1514926

## Name and Address of Current Registered Agent:

HOLLIDAY GROUP 1100 S TAMIAMI TRL, STE 302 SARASOTA, FL 34236 US

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	CRAIG HOLLIDAY			02/06/2025	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	PRESIDENT/AUTHORIZED MEMBER	Title	SECRETARY		
Name	HOLLIDAY, D. CRAIG	Name	HOLLIDAY, LISA		
Address	1100 S TAMIAMI TRL, STE 302	Address	1100 S TAMIAMI TRL, STE 302		
City-State-Zip:	SARASOTA FL 34236	City-State-Zip:	SARASOTA FL 34236		
Title	AUTHORIZED MEMBER	Title	VP		
Name	POVICH, KEITH	Name	GRAHAM, PATRICK		
Address	1100 S TAMIAMI TRL, STE 302	Address	1100 S TAMIAMI TRL, STE 302		
City-State-Zip:	SARASOTA FL 34236	City-State-Zip:	SARASOTA FL 34236		

Certificate of Status Desired: No

FILED Feb 06, 2025 Secretary of State 2246469189CC

## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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PRESIDENT

Date