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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711298

1. Corporation Name

HOLIDAY HEIGHTS CIVIC ASSOCIATION, INC.

Principal Place of Business

5103 20TH ST. W
5103 20TH STREET W.
BRADENTON FL 34207
US

Mailing Address

5103 20TH ST.. W
5103 20TH STREET W.
BRADENTON FL 34207
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/05/1966

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

65-0039236

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERES, ETHEL
5103 20TH STREET W.
BRADENTON FL 34207

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VPD DELETE
NAME BERES, ETHEL
STREET ADDRESS 5103 20TH ST. W.
CITY-ST-ZIP BRADENTON FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE PD DELETE
NAME HANNESSY, DANIEL W
STREET ADDRESS 2004 52ND AVE
CITY-ST-ZIP BRADENTON FL

2.1 TITLE PD Change Addition
2.2 NAME SMOTRYSKI, Celeste
2.3 STREET ADDRESS 4805 19th St W
2.4 CITY-ST-ZIP Bradenton, FL 34207

TITLE TD DELETE
NAME STOVER, NORMA
STREET ADDRESS 5105 20TH ST. W.
CITY-ST-ZIP BRADENTON FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE SD DELETE
NAME SWINDLE, KATHY
STREET ADDRESS 5009 19TH ST. W.
CITY-ST-ZIP BRADENTON FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D DELETE
NAME WAITE, CLARK
STREET ADDRESS 5116 18TH AVE W
CITY-ST-ZIP BRADENTON FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D DELETE
NAME PERMANE, ROBERT
STREET ADDRESS 2103 - 51ST AVE W
CITY-ST-ZIP BRADENTON FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ethel Beres

January 09, 1999 (941)756-4185

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)