

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722500

FILED
Mar 18, 2008
Secretary of State

Entity Name: HOLLEY BY THE SEA IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

6845 NAVARRE PKWY
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

6845 NAVARRE PKWY
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 59-1510753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANCHORS, MICHELLE
909 MAR WALT DRIVE
SUITE 1014
FORT WALTON BEACH, FL 32547 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROGERS, NEAL
Address: 7111 JASPER STREET
City-St-Zip: NAVARRE, FL 32566

Title: S () Delete
Name: HUCKESTEIN, CATHY
Address: 2351 ASH LANE
City-St-Zip: NAVARRE, FL 32566

Title: VP () Delete
Name: PARKER, PRIESTLEY
Address: 2628 HOLLEY CLUB DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: VP () Delete
Name: TIERNEY, JAMES
Address: 6652 KEMPTON ROAD
City-St-Zip: NAVARRE, FL 32566

Title: T () Delete
Name: LIMOUSIN, LEIGH ANNE
Address: 6717 ELBING STREET
City-St-Zip: NAVARRE, FL 32566

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:

Title: T (X) Change () Addition
Name: WALKER, CRAIG
Address: 6632 CODELL STREET
City-St-Zip: NAVARRE, FL 32566

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDY HOEFLICH FOR BOD

FD

03/18/2008

Electronic Signature of Signing Officer or Director

Date