2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State
02-26-2003 90160 027 ****61.25

DOCUMENT # 757389

1. Entity Name
HOLIDAY CONDOMINIUM, INC.

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
16410 SAN CARLOS BLVD FT. MYERS FL 33908 US	16410 SAN CARLOS BLVD FT. MYERS FL 33908 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2821709 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ADAMS, JOSEPH E ESQ.
THE COLONNADES
13515 BELL TOWER DR., SUITE #101
FORT MYERS FL 33907

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GIAMMARCO, FELICIANO 16410 SAN CARLOS BLVD #434 FORT MYERS FL 33908	XX ☒ Delete	T MATHENY, BOB 11691 Slippershell Dr. Ft. Myers, FL 33908	XX ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LANG, CARL 11601 SWARF GINSENG DR FORT MYERS FL 33-908/	☐ Delete	D LANG, CARL 11601 Dwarf Ginseng Dr. Ft. Myers, FL 33908	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAY, GENE 16320 FALSTAFF DR FORT MYERS FL 33908	☐ Delete	D BRISSETTE, SYLVIA 11521 Papershell Dr. Ft. Myers, Fl. 33908	☐ Change XX ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WENDT, JAMES 11691 BUBBLE SHELL DR FORT MYERS FL 33908	☐ Delete	PD MCQUIRT, HAROLD 11581 Ariana Dr. Ft. Myers, FL. 33908	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EMORY, JOSEPH 16331 RED CLOVER LN FORT MYERS FL 33908	XX ☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HAYWOOD, RON 16300 RED CLOVER LN FORT MYERS FL 33908	☐ Delete		☐ Change ☐ Addition

CR2E037 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Harold McQuirt Director 2/4/03 239 457 8779
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR REQUIRED