


**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90433 019 \*\*\*\*70.00

**DOCUMENT # N01000004266**

1. Entity Name  
**HOLIDAY HOOPS, INC.**



Principal Place of Business      Mailing Address  
**17270 89TH PLACE N**      **17270 89TH PLACE N**  
**LOXAHATCHEE FL 33470**      **LOXAHATCHEE FL 33470**

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      Applied For  
**65-1114537**      Not Applicable

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



MOORE      CR2E037 (11/03)

**6. Name and Address of Current Registered Agent**

**HOLIDAY, WESTLEY**  
**17270 89TH PLACE N**  
**LOXAHATCHEE FL 33470**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

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**

TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>GRIGGS, DONEY</b>	
STREET ADDRESS	<b>1379 9TH COURT</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33407</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>BARBIERI, NICK</b>	
STREET ADDRESS	<b>1020 JENNINGS STREET</b>	
CITY-ST-ZIP	<b>LANTANA FL 33462</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>WYATT, LARRY</b>	
STREET ADDRESS	<b>517 20TH AVENUE NORTH</b>	
CITY-ST-ZIP	<b>LAKE WORTH FL 33460</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>BENTLEY, JUANITA</b>	
STREET ADDRESS	<b>210 SHIRE DRIVE</b>	
CITY-ST-ZIP	<b>RIVIERA BEACH FL 33404</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>MCDANIEL, LILLIE</b>	
STREET ADDRESS	<b>4845 FOXWOOD DRIVE</b>	
CITY-ST-ZIP	<b>WEST PALM BEACH FL 33417</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Shedrick Shields</b>	
STREET ADDRESS	<b>969 Yardly Road</b>	
CITY-ST-ZIP	<b>JACKSONVILLE FL 32224</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Sheray Gaffney</b>	
STREET ADDRESS	<b>1755 Leon Road Apt 3313</b>	
CITY-ST-ZIP	<b>JACKSONVILLE FL 32246</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Kenny Davis</b>	
STREET ADDRESS	<b>3601 Commercial Blvd Suite 35</b>	
CITY-ST-ZIP	<b>Fort Lauderdale FL 33311</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:** *[Signature]*      **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date: **4/26/04**      Daytime Phone #: **(561) 513-1711**