

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 05, 2005
Secretary of State**

DOCUMENT# N01000004266

Entity Name: HOLIDAY HOOPS, INC.

Current Principal Place of Business:

17270 89TH PLACE N
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

17270 89TH PLACE N
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 65-1114537 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HOLIDAY, WESTLEY
17270 89TH PLACE N
LOXAHATCHEE, FL 33470 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHIELLS, SHEDRICK
Address: 969 YARDLY ROAD
City-St-Zip: JACKSONVILLE, FL 32221

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: GAFFNEY, SHERAY
Address: 1755 LEON ROAD APT 3313
City-St-Zip: JACKSONVILLE, FL 32246

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: WYATT, LARRY
Address: 517 20TH AVENUE NORTH
City-St-Zip: LAKE WORTH, FL 33460

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: BENTLEY, JUANITA
Address: 210 SHIRE DRIVE
City-St-Zip: RIVIERA BEACH, FL 33404

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: DAVIS, KENNY
Address: 3601 COMMERCIAL BLVD. SUITE 35
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WESTLEY HOLIDAY

CEO

07/05/2005

Electronic Signature of Signing Officer or Director

_____ Date