

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N01000004266

Entity Name: HOLIDAY HOOPS, INC.

Current Principal Place of Business:

5725 CORPORATE WAY
SUITE 207
WEST PALM BEACH, FL 33407

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:

HOLIDAY, WESTLEY
17270 89TH PLACE N
LOXAHATCHEE, FL 33470 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: D () Delete
Name: SHIELDS, SHEDRICK
Address: 969 YARDLY COURT
City-St-Zip: JACKSONVILLE, FL 32221

Title: D () Delete
Name: GAFFNEY, SHERAY B
Address: 2648 WILKINS COURT
City-St-Zip: JACKSONVILLE, FL 32209

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

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

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

Title: () Delete
Name:
Address:
City-St-Zip:

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

Title: D () Change (X) Addition
Name: HOLIDAY, JUDY L
Address: 17270 89TH PLACE NORTH
City-St-Zip: LOXAHATCHEE, FL 33470

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: WESTLEY HOLIDAY

CEO

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date