

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 29, 2011
Secretary of State

Entity Name: HOLIDAY HOOPS, INC.

Current Principal Place of Business:

17270 89TH PLACE NORTH
LOXAHATCHEE, FL 33470

New Principal Place of Business:

Current Mailing Address:

17270 89TH PLACE NORTH
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 65-1114537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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
Name: SHIELDS, SHEDRICK
Address: 969 YARDLY COURT
City-St-Zip: JACKSONVILLE, FL 32221

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

Title: D
Name: HOLIDAY, WESTLEY T
Address: 540 W.136TH STREET
City-St-Zip: NEW YORK, NY 10031

Title: D
Name: BENTLEY, JUANITA
Address: 210 SHORE DRIVE
City-St-Zip: RIVIERA BEACH, FL 33404

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

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

I hereby 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 all other like empowered.

SIGNATURE: WESTLEY HOLIDAY

CEO

04/29/2011

Electronic Signature of Signing Officer or Director

Date