

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90053 031 ****70.00

DOCUMENT # N05881

1. Entity Name

HOLIDAY VILLAGE HOME OWNERS ASSOCIATION, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1335 FLEMING AVE. LOT # 40, ORMOND BEACH FL 32174	Mailing Address 1335 FLEMING AVE. LOT # 40 ORMOND BEACH FL 32174-5972
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2. Principal Place of Business 1335 Fleming Ave.	3. Mailing Address 1335 Fleming Ave.
Suite, Apt. #, etc. # 2	Suite, Apt. #, etc. # 2
City & State Ormond Beach, Fl	City & State Ormond Beach, Fl
Zip 32174	Country USA

4. FEI Number 59-2888504	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HOUSTON, JENIFER
1335 FLEMING AVE
LOT #40
ORMOND BEACH FL 32174

7. Name and Address of New Registered Agent

Name **ADKINS BARBARA**
 Street Address (P.O. Box Number is Not Acceptable)
1335 Fleming Ave. Lot #2
Ormond Beach, Fl. 32174
 City **ORMOND BEACH. FL** Zip Code **32174**

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.

SIGNATURE **BARBARA ADKINS PD** *Barbara Adkins* **FEB 8, 2000**
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. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State SEE ANNEX 'A'
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10. OFFICERS AND DIRECTORS

TITLE PD	<input type="checkbox"/> Delete
NAME HOUSTON, JENIFER	
STREET ADDRESS 1335 FLEMING AVE #40	
CITY-ST-ZIP ORMOND BEACH FL 32174	
TITLE VD	<input type="checkbox"/> Delete
NAME SANFORD, DAVID	
STREET ADDRESS 1335 FLEMING AVE., #30	
CITY-ST-ZIP ORMOND BEACH FL 32174	
TITLE SD	<input type="checkbox"/> Delete
NAME ADKINS, BARBARA	
STREET ADDRESS 1335 FLEMING AVE #2	
CITY-ST-ZIP ORMOND BEACH FL 32174	
TITLE TD	<input type="checkbox"/> Delete
NAME ANGELINE, SHIRLEY	
STREET ADDRESS 1335 FLEMING AVE., #289	
CITY-ST-ZIP ORMOND BEACH FL 32174	
TITLE D	<input type="checkbox"/> Delete
NAME MERES, JOAN	
STREET ADDRESS 1335 FLEMING AVENUE, #52	
CITY-ST-ZIP ORMOND BEACH FL 32174	
TITLE D	<input type="checkbox"/> Delete
NAME DEFORGE, LOUISE	
STREET ADDRESS 1335 FLEMING AVENUE, #31	
CITY-ST-ZIP ORMOND BEACH FL 32174	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ADKINS BARBARA	
STREET ADDRESS 1335 Fleming Ave. #2	
CITY-ST-ZIP Ormond Beach, Fl 32174	
TITLE VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME WARNER, BILL	
STREET ADDRESS 1335 Fleming Ave. #227	
CITY-ST-ZIP Ormond Beach, Fl 32174	
TITLE TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME EUCHLER, IRENE	
STREET ADDRESS 1335 Fleming Ave. #272	
CITY-ST-ZIP Ormond Beach, Fl 32174	
TITLE SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME CYR, ROGER	
STREET ADDRESS 1335 Fleming Ave. #108	
CITY-ST-ZIP Ormond Beach, Fl 32174	
TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SANFORD, DAVE	
STREET ADDRESS 1335 Fleming Ave. #30	
CITY-ST-ZIP Ormond Beach, Fl 32174	
TITLE D	<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: *Barbara Adkins* **FEB 8, 2000 0416153862**

CR2E037 19/99