2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2006 8:00 am
Secretary of State
03-06-2006 90025 008 ****61.25

DOCUMENT # N07430

1. Entity Name

HOLLY FOREST MOBILE HOMEOWNERS ASSOC. INC.

1st MOORE CR2E037 (10/05)

Principal Place of Business	Mailing Address
1000 WALKER HOLLYHILL FL 32117 US	~~1000 WALKER~~ ~~#275~~ ~~HOLLYHILL FL 32117~~ ~~US~~

2. Principal Place of Business	3. Mailing Address
	1000 WALKER ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc. # 999
City & State	City & State HOLLY HILL FL.
Zip / Country	Zip 32117 / Country US

4. FEI Number 59-2496443 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~CARTER, BRENDA~~ 1000 ~~WALKER #275~~ HOLLY HILL ~~FL 32117~~	Name LINDA COOPER Street Address (P.O. Box Number is Not Acceptable) 1000 WALKER ST #999 City HOLLY HILL FL Zip Code 32117

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 Linda L Cooper 2/18/06
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
Due By May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P COOPER, LINDA L 1000 WALKER ST #298 HOLLY HILL FL 32117	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM BARBARA DRAKE 1000 WALKER ST. #326 HOLLY HILL FL. 32117	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ANDERSON, ANN 1000 WALKER ST #31 HOLLY HILL FL 32117	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ~~DI GIOLIO, MARIE~~ ~~1000 WALKER ST #339~~ ~~HOLLY HILL FL 32117~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC. YVONNE LIVESAY 1000 WALKER ST. #35 HOLLY HILL FL. 32117	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ~~MIKOL, LAKITTY~~ ~~1000 WALKER ST #145~~ ~~HOLLY HILL FL 32117~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREAS GARY MONTIE 1000 WALKER #6 HOLLY HILL FL. 32117	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM ~~GREIG, DOREEN~~ ~~1000 WALKER ST #49~~ ~~HOLLY HILL FL 32117~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM JIM WILLMAN 1000 WALKER ST #28 HOLLY HILL FL. 32117	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM ~~WALLACE, NANCY~~ ~~1000 WALKER ST #321~~ ~~HOLLY HILL FL 32117~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BM ROSALIE FLETCHER 1000 WALKER ST.#258 HOLLY HILL FL. 32117	☑ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Linda L Cooper 2/18/06