

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757389

Entity Name: HOLIDAY CONDOMINIUM, INC.**Current Principal Place of Business:**16410 SAN CARLOS BLVD
FT. MYERS, FL 33908**Current Mailing Address:**16410 SAN CARLOS BLVD
FT. MYERS, FL 33908 US**FEI Number:** 59-2821709**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
12140 CARISSA COMMERCE CT STE 200
FORT MYERS, FL 33966 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**Officer/Director Detail :**

Title	PRESIDENT
Name	BARTOE, FLOYD
Address	11530 BLUE WARBLER DR
City-State-Zip:	FORT MYERS FL 33908

Title	TREASURER
Name	GIFFORD, KEN
Address	11641 CARDIFF DR.
City-State-Zip:	FORT MYERS FL 33908

Title	VP
Name	TEX, LINDA
Address	11661 HOLIDAY CONDO DR
City-State-Zip:	FORT MYERS FL 33908

Title	DIRECTOR
Name	MOORE, JACK
Address	11571 PAPERSHELL DR
City-State-Zip:	FT. MYERS FL 33908

Title	SECRETARY
Name	JOHNSON, JOYCE
Address	11591 SLIPPER SHELL DR
City-State-Zip:	FT. MYERS FL 33908

Title	DIRECTOR
Name	PATTERSON , NANCY
Address	11601 BUBBLE SHELL DR
City-State-Zip:	FT. MYERS FL 33908

Title	DIRECTOR
Name	STYNDL, MICHELL
Address	11620 BLUE WARBLER DR
City-State-Zip:	FT. MYERS FL 33908

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: FLOYD BARTOE**PRESIDENT****03/29/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date