

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000004266

**Entity Name:** HOLIDAY HOOPS, INC.

**Current Principal Place of Business:**

17270 89TH PLACE NORTH  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

17270 89TH PLACE NORTH  
LOXAHATCHEE, FL 33470

**FEI Number:** 65-1114537

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HOLIDAY, WESTLEY  
17270 89TH PLACE N  
LOXAHATCHEE, FL 33470 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 D  
Name HOLIDAY, FAITH MAJIAE  
Address 7529 PARK PROMENADE DRIVE APT  
1616  
City-State-Zip: WINTER PARK FL 32792

Title T  
Name HOLIDAY, WESTLEY T  
Address 559 WEST 164TH STREET  
APT 6A  
City-State-Zip: NEW YORK NY 10032

Title ASST. SECRETARY  
Name GAFFNEY, SHERAY BERNARD  
Address 9541 103RD STREET #908  
City-State-Zip: JACKSONVILLE FL 32210

Title VP  
Name HOLIDAY, JUDY LINDER  
Address 17270 89TH PLACE NORTH  
City-State-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

04/30/2020

Electronic Signature of Signing Officer/Director Detail

Date