2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004998

Entity Name: BRIGHT HOLIDAYS, INC.

Current Principal Place of Business:

7540 FOUNDERS WAY

PONTE VEDRA BEACH, FL 32082

FILED Jan 18, 2017 Secretary of State CC8390497659

Date

Current Mailing Address:

7540 FOUNDERS WAY

PONTE VEDRA BEACH, FL 32082 US

FEI Number: 20-2840502 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHREVE, MIKE 7540 FOUNDERS WAY

PONTE VEDRA BEACH, FL 32082 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: MIKE SHREVE 01/18/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **CHAIRMAN** Title D

FORRESTER, JOHN N VIOLETRA, WARD Name Name

24532 DEER TRACE DRIVE 6127 CEDAR HILLS BLVD. Address Address City-State-Zip: JACKSONVILLE FL 32210 PONTE VEDRA BEACH FL 32082 City-State-Zip:

Title D Title D

Name FRASER, THOMAS JJR HUSK, MELANIE J Name

Address 4230 PABLO PROFESSIONAL COURT Address 10734 WAVERLEY BLUFF WAY

SUITE 250

JACKSONVILLE FL 32223 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32224

Title D

DIRECTOR

Title

Title D JOHNSON, SYLVIA Name

Name HANSON, KARL 900 ACORN STREET

Address Address 5121 WILTON WALK DRIVE JACKSONVILLE FL 32209 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR FORRESTER, LEIGH M Name

24532 DEER TRACE DRIVE Address Address 13133VIA ROMA COURT

PONTE VEDRA BEACH FL 32082 City-State-Zip: JACKSONVILLE FL 32224 City-State-Zip:

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WAGNER, PAIGE

Name

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.

01/18/2017 SIGNATURE: JOHN FORRESTER **CHAIRMAN**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name HOFFMANN, LINDSAY

Address 11 ARBOR COURT

APT. 320

City-State-Zip: PONTE VEDRA FL 32082

Title DIRECTOR
Name MILLER, TODD

Address 24532 DEER TRACE DRIVE

City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR

Name MCQUIDDY, DEAN

Address 1579 THE GREENS WAY

SUITE 20

City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR

Name SWANTEK, HOLLY

Address 10264 HEATHER GLEN DRIVE
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR

Name KING, FRANCES

Address 111 SOLANA ROAD

SUITE B

City-State-Zip: PONTE VEDRA FL 32082

Title PRESIDENT
Name SHREVE, MIKE

Address 7540 FOUNDERS WAY

City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR

Name HAWKINS, HANNAH Address 7540 FOUNDERS WAY

City-State-Zip: PONTE VEDRA BEACH FL 32082