2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05881

Entity Name: HOLIDAY VILLAGE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

HOLDAY VIILLAGE MOBILE HOME PARK
1335 FLEMING AVENUE, #3
ORMOND BEACH, FL 32174

Current Mailing Address:

HOLIDAY VILLAGE MOBILE HOME PARK
1335 FLEMING AVENUE, #3
ORMOND BEACH, FL 32174 US

FEI Number: 59-2888504

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TULLY, CONSTANCE VTD
1335 FLEMING AVENUE L0T 146
ORMOND BEACH, FL 32174 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	PD		Title	TD
Name	ROGERS, MARY PD		Name	TULLY, CONSTANCE V
Address	1335 FLEMING AVE LOT #49		Address	1335 FLEMING AVE LOT#146
City-State-Zip:	ORMOND BEACH FL 32174		City-State-Zip:	ORMOND BEACH FL 32174
Title	SC		Title	VD
Name	BARNES, ROY		Name	BORDEN, DAVID
Address	1335 FLEMING AVE LOT #101		Address	1335 FLEMING AVE LOT #292
City-State-Zip:	ORMOND BEACH FL 32174		City-State-Zip:	ORMOND BEACH FL 32174
Title	D		Title	D
Name	WARREN, KRISTE		Name	LOWDER, JACK
Address	1335 FLEMING AVE 137		Address	1335 FLEMING AVE #279
City-State-Zip:	ORMOND BEACH FL 32174		City-State-Zip:	ORMOND BEACH FL 32174
Title	DIRECTOR			
Name	WILLIAMS, KATHLEEN M			
Address	1335 FLEMING AVE LOT 52			
City-State-Zip:	ORMOND BEACH FL 32174			

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: CONSTANCE V. TULLY   TREASURER DIRECTOR   03/01/2017

Electronic Signature of Signing Officer/Director Detail   Date