

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

AMENDED

DOCUMENT # 190985

1. Entry Name

HOLLAND SALLEY, INC.

FILED

02 AUG 16 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700007289917--5

-08/22/02--01064--006

*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business

2975 South Horseshoe Drive

3. Mailing Address

2975 South Horseshoe Drive

Suite, Apt., etc.

Suite 800

Suite, Apt., etc.

Suite 800

City & State

Naples, Florida 34104

City & State

Naples, Florida 34104

Zip

Country

Zip

Country

4. FEI Number

59-0761340

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Salley, Holland T.

Street Address (P.O. Box Number is Not Acceptable)

1661 Galleon Drive

City

Naples

FL

34102

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be

Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
C/T
Salley, Holland ASID, ID0000100
STREET ADDRESS
1661 Galleon Drive
CITY-ST-ZIP
Naples, Florida 34102

TITLE
NAME
VD
Salley, Stephen G.
STREET ADDRESS
235 Spring Lake Hills Drive
CITY-ST-ZIP
Altamonte Springs, Florida 32714

TITLE
NAME
P
Riley, Michael J.
STREET ADDRESS
8024 San Simeon Way
CITY-ST-ZIP
Naples, Florida 34109

TITLE
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STREET ADDRESS
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Holland T. Salley ASID
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 14, 2002 239-261-7464

Date

Daytime Phone #

21 8/16/02