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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 21 1996 8:00 am
Secretary of State

DOCUMENT # 597589

(1)

1. Corporation Name

HOLLOWAY CORPORATION

Principal Place of Business

**2980 64TH AVE NORTH
ST PETERSBURG FL 33702**

Mailing Address

**2980 64TH AVE NORTH
ST PETERSBURG FL 33702**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

City & State

Zip

Country

g. Name and Address of Current Registered Agent

**CHESHIRE, CLAUD CHARLES
1401 - 77TH AVENUE, NORTH
ST PETERSBURG FL 33702**

81

Name

82

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

83

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent for corporation

Printed Name of Agent for corporation (Not to be used for signature)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	CHESHIRE, WALTER M	
STREET ADDRESS	2980 64TH AVE NO	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	ST	DELETE
NAME	CHESHIRE, RUTH	
STREET ADDRESS	2980 64TH AVE NO	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	V	DELETE
NAME	CHESHIRE, CHARLES	
STREET ADDRESS	1401 77TH AVE N	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Walter M. Cheshire

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER M CHESHIRE

18 MAR 96

935-3833

Date

Daytime Florida #

CR2E034 (12/95)