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May 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 633247 (2)

1. Corporation Name
HOLLER ENTERPRISES, INC.

Principal Place of Business
880 WEST FAIRBANKS AVENUE
P O BOX 1720
WINTER PARK FL 32780-1720

Mailing Address
880 WEST FAIRBANKS AVENUE
P O BOX 1720
WINTER PARK FL 32780-1720



2. Principal Place of Business
21 500 Park Avenue South
Suite, Apt. #, etc.
22 Suite 202
City & State
23 Winter Park, FL
Zip
24 32789
Country
25 Orange

2a. Mailing Address
26 500 Park Avenue South
Suite, Apt. #, etc.
27 Suite 202
City & State
28 Winter Park, FL
Zip
29 32789
Country
30 Orange

3. Date Incorporated or Qualified 08/20/1979
3a. Date of Last Report 05/01/1996
4. FEI Number 59-2486006 59-1931579
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

HOLLER JR., ROGER W.
880 WEST FAIRBANKS AVENUE
WINTER PARK FL

10. Name and Address of New Registered Agent

81 Name
Pamela O. Price
82 Street Address (P.O. Box Number is Not Acceptable)
201 E. Pine Street
83 Suite 1200
84 City
Orlando
85 Zip Code
FL 32802

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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature typed or printed name of registered agent and title if applicable DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	HOLLER, JR, ROGER W	
STREET ADDRESS	880 W FAIRBANKS	
CITY-ST-ZIP	WINTER PARK, FL 0	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HOLLER, ROGER W III	
STREET ADDRESS	880 W. FAIRBANKS	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HOLLER, CHRISTOPHER A	
STREET ADDRESS	880 WEST FAIRBANKS AVENUE	
CITY-ST-ZIP	WINTER PARK FL 32780-1720	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HOLLER, JULIETTE E	
STREET ADDRESS	880 WEST FAIRBANKS AVENUE	
CITY-ST-ZIP	WINTER PARK FL 32780-1720	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Holler, Roger W. Jr.	
1.3 STREET ADDRESS	500 Park Avenue South, Suite 202	
1.4 CITY-ST-ZIP	Winter Park, FL 32789	
2.1 TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Holler, Roger W. III	
2.3 STREET ADDRESS	500 Park Avenue South, Suite 202	
2.4 CITY-ST-ZIP	Winter Park, FL 32789	
3.1 TITLE	V/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Holler, Christopher A.	
3.3 STREET ADDRESS	500 Park Avenue South, Suite 202	
3.4 CITY-ST-ZIP	Winter Park, FL 32789	
4.1 TITLE	V/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Holler, Juliette E.	
4.3 STREET ADDRESS	500 Park Avenue South, Suite 202	
4.4 CITY-ST-ZIP	Winter Park, FL 32789	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ 4/23/97 407-640-4131
ROGER W. HOLLER JR. PRESIDENT Date Daytime Phone

CR2E034 (9/96)