2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 20, 2007 8:00 am **DOCUMENT # 719845 Secretary of State** 1. Entity Name 03-20-2007 90015 016 ****61.25 HOLLY GREENS VILLA, INC. Principal Place of Business Mailing Address 3070 GULF SHORE BOULEVARD NORTH 3070 GULF SHORE BOULEVARD NORTH NAPLES FL 34103 NAPLES FL 34103 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-1405101 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6: Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MOORE, WILLIAM C/O MELDON CONSULTANTS Street Address (P.O. Box Number is Not Acceptable) 4949 TAMIAMI TRL N STE201 NAPLES FL 34103 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. \Box Due By May 1, 2007 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 HILE **VPS** SD Change ☐ Delete THILL Addition NAME OLMEN, PATRICIA NAME STREET ADDRESS 3070 GULF SHORE BLVD N 205 STREET ADDRESS CITY - ST- ZIP NAPLES FL 34103 CITY - ST- 7IP DITE □ Delete TITLE ☐ Change Addition Wigton, John H. 3070 Gulf Shore Blvd N*108 CROVO, ADELINE NAME 3070 GULF SHORE BLVD N 201 STRUET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY ST-ZIP NAPLES FL 34103 Naples, FL 34103 Hitt **⊠** Delete VP/b HILE [] Change ☐ Addition Griffith, Jim 3070 Gulf Shore Blud N \$ 104 NAME HOMER, KATHERINE STREET ADDRESS 3070 GULF SHORE BLVD N # 101 STREET ADDRESS CHY ST-7IP CHY ST-ZIP NAPLES FL 34103 Naples, FL 34103 THE ☐ Delete THE Change Addition NAME JOHNSON, JOAN NAME STREET ADDRESS 3070 GULF SHORE BLVD N 202 STREET ADDRESS CITY-ST-7IP CITY-ST-7fP NAPLES FL 34103 HHE Delete TITLE ☐ Change Addition NAME DECKER, BEVERLY NAME STREET ADDRESS 72 PROSPECT ST STREET ADDRESS CITY - ST- 7(P BARRINGTON RI 02806 CITY - ST- ZIP Delete THEE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-79P CHY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with according with my other like empowered.

FILED