

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719845

FILED
Apr 27, 2009
Secretary of State

Entity Name: HOLLY GREENS VILLA, INC.

Current Principal Place of Business:

3070 GULF SHORE BOULEVARD NORTH
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

4949 TAMIAMI TRAIL N
STE 201
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-1405101 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, WILLIAM
C/O MELDON CONSULTANTS
4949 TAMIAMI TRL N STE201
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: OLMEN, PATRICIA
Address: 3070 GULF SHORE BLVD N 205
City-St-Zip: NAPLES, FL 34103

Title: PD () Delete
Name: WIGTON, JOHN H
Address: 3070 GULF SHORE BLVD N #108
City-St-Zip: NAPLES, FL 34103

Title: VPD () Delete
Name: GRIFFITH, JIM
Address: 3070 GULF SHORE BLVD N #104
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: JOHNSON, JOAN
Address: 3070 GULF SHORE BLVD N 202
City-St-Zip: NAPLES, FL 34103

Title: TD () Delete
Name: DECKER, BEVERLY
Address: 72 PROSPECT ST
City-St-Zip: BARRINGTON, RI 02806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: OLMEN, PATRICIA
Address: 3070 GULF SHORE BLVD N #205
City-St-Zip: NAPLES, FL 34103

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HEWITT, MIKE
Address: 3070 GULF SHORE BLVD N #211
City-St-Zip: NAPLES, FL 34103

Title: VPD (X) Change () Addition
Name: JOHNSON, JOAN
Address: 3070 GULF SHORE BLVD N #202
City-St-Zip: NAPLES, FL 34103

Title: TD (X) Change () Addition
Name: DECKER, BEVERLY
Address: 3070 GULF SHORE BLVD N #206
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN H. WIGTON

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date