

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734387

FILED
Jan 06, 2005
Secretary of State

Entity Name: THE HOLY WAY, INC.

Current Principal Place of Business:

P.O.BOX 641
PAHOKEE, FL 33476

New Principal Place of Business:

7618 N. SHILLELAGH AVE.
CRYSTAL RIVER, FL 34428

Current Mailing Address:

P.O.BOX 641
PAHOKEE, FL 33476

New Mailing Address:

P. O. BOX 2379
CRYSTAL RIVER, FL 34423

FEI Number: 59-1631919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLER, J D
1568 E. MAIN ST.
PAHOKEE, FL 33476 US

Name and Address of New Registered Agent:

MILLER, J D
7618 N. SHILLELAGH AVE.
CRYSTAL RIVER, FL 34428 US

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: JD MILLER

01/06/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: MILLER, J D
Address: P.O. BOX 2379
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D () Delete
Name: HATFIELD, KYLE
Address: 7618 N SHILLELAGH AVE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: P () Delete
Name: HATFIELD, LARRY E
Address: 7618 N SHILLELAGH AVE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: V () Delete
Name: HUNTER, RODGER
Address: 7618 N SHILLELAGH AVE
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: D () Delete
Name: HUNTER, RODGER
Address: P.O. BOX 734
City-St-Zip: PAHOKEE, FL 33476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: MILLER, J D
Address: 7618 N. SHILLELAGH AVE.
City-St-Zip: CRYSTAL RIVER, FL 34428

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: J. D. MILLER

STD

01/06/2005

Electronic Signature of Signing Officer or Director

Date