

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757389

FILED  
Aug 19, 2010  
Secretary of State

**Entity Name:** HOLIDAY CONDOMINIUM, INC.

**Current Principal Place of Business:**

16410 SAN CARLOS BLVD  
FT. MYERS, FL 33908 US

**New Principal Place of Business:**

**Current Mailing Address:**

16410 SAN CARLOS BLVD  
FT. MYERS, FL 33908 US

**New Mailing Address:**

**FEI Number:** 59-2821709

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
12140 CARISSA COMMERCE COURT, #200  
FORT MYERS, FL 33966 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: T  
Name: MATHENY, BOB  
Address: 11691 SLIPPERSHELL DR  
City-St-Zip: FORT MYERS, FL 33908

Title: S  
Name: HOGSTEN, JOHN  
Address: 16331 NEPTUNE LN.  
City-St-Zip: FT. MYERS, FL 33908

Title: VP  
Name: CRAMER, JULIANA  
Address: 11680 ARIANA DR.  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: VANMASTRIGT, HANK  
Address: 11651 VALLEYVEIW DR.  
City-St-Zip: FORT MYERS, FL 33908

Title: P  
Name: MCQUIRT, HAROLD  
Address: 11581 ARIANA DR.  
City-St-Zip: FORT MYERS, FL 33908

Title: D  
Name: CARROLL, CHARLES  
Address: 16331 FALSTAFF LN.  
City-St-Zip: FT. MYERS, FL 33908

I hereby 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 all other like empowered.

SIGNATURE: HAROLD MCQUIRT

P

08/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date