

# 2001 UNIFORM BUSINESS REPORT (UBR)

*Pg 2*

FILED

01 APR 24 AM 8:58

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

|   |   |   |   |
|---|---|---|---|
| <b>DOCUMENT # 835993</b>  |   |   |   |
| 1. Entity Name<br>Holiday Investment Properties Inc.<br><i>New</i>  |   |   |   |
| Principal Place of Business<br><i>1150 Highway 98 East<br/>Destin, FL 32541</i>   |   | Mailing Address<br><i>Same</i>  |   |
| 2. Principal Place of Business<br><del>1014 Underwood Avenue</del>  |   | 3. Mailing Address<br><del>1014 Underwood Avenue</del>  |   |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.   |   |
| City & State<br><del>Pensacola FL</del>   |   | City & State<br><del>Pensacola FL</del>   |   |
| Zip<br><del>32504</del>   | Country<br><del>US</del>  | Zip<br><del>32504</del>   | Country<br><del>US</del>  |
| 4. FEI Number<br><b>61-0709580</b>  |   | Applied For<br><input type="checkbox"/> Not Applicable  |   |
| 5. Certificate of Status Desired <input type="checkbox"/>   |   | \$8.75 Additional Fee Required  |   |
| 6. Name and Address of Current Registered Agent<br><br>Edward F. Lemox<br>1014 Underwood Avenue<br>Pensacola, FL 32504  |   | 7. Name and Address of New Registered Agent<br><br>Name<br><b>William C. Sanders</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>720 Gulf Shore Drive</b><br><br>City<br><b>Destin</b> <b>FL</b> Zip Code<br><b>32541</b> |   |
| 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.<br><br>SIGNATURE <i>William C. Sanders</i> <b>William C. Sanders, Vice President</b> <b>March 30, 2001</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>  |   |   |   |
| 9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. <input type="checkbox"/><br><small>(See criteria on back)</small>   |   | <div style="border: 1px solid black; padding: 2px; text-align: center;"> <b>FILE NOW!! FEE IS \$150.00</b><br/> <b>AND MAY 15, 2001 FEE WILL BE \$150.00</b><br/> <b>Make Check Payable to Department of State</b> </div>                 |   |
| 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>   |   | \$5.00 May Be Added to Fees   |   |
| 11. OFFICERS AND DIRECTORS  |   | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | Edward F. Lemox <input checked="" type="checkbox"/> Delete<br>421 Tanglewood Drive<br>Pensacola, FL 32503<br><b>President</b>         | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | Rebecca L. Sanders <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>720 Gulf Shore Drive<br>Destin, FL 32541<br><b>President &amp; Director</b>      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | Melba Jean Lemox <input checked="" type="checkbox"/> Delete<br>2116 Morningside Drive<br>Pensacola, FL 32503<br><b>Vice President</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | William C. Sanders <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>720 Gulf Shore Drive<br>Destin, FL 32541<br><b>Vice President &amp; Director</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | Peggy E. Means <input checked="" type="checkbox"/> Delete<br>11611 Oakshadows Lane<br>Houston, TX<br><b>Director</b>                  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | Michael E. Zeller <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>100 N. Tryon Street<br>Charlotte, NC 28202<br><b>Assistant Secretary</b>          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | Sherry L. Duncan <input checked="" type="checkbox"/> Delete<br>7221 Breitenfield Place<br>Birmingham, AL 35242<br><b>Director</b>     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <b>700004064667-4</b>   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| 13. I 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 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. |   |   |   |
| SIGNATURE: <i>William C. Sanders</i> <b>William C. Sanders, VP</b> <b>3/30/01</b>   |   | <b>850-837-3484</b><br><small>Daytime Phone #</small>   |   |

CR2E034 (11/00)



*Boehr*

ACCOUNT NO. : 072100000032

REFERENCE : 124603 4321551

AUTHORIZATION :

*Patricia Pizute*

COST LIMIT : \$ 150.00

ORDER DATE : April 23, 2001

ORDER TIME : 11:04 AM

ORDER NO. : 124603-005

CUSTOMER NO: 4321551

CUSTOMER: Tina Cox, Legal Asst  
Moore & Van Allen, PLLC  
100 North Tryon Street  
47th Floor  
Charlotte, NC 28202-4003

ANNUAL REPORT FILING

NAME: HOLIDAY INVESTMENT PROPERTIES  
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: SUSIE KNIGHT EXT: 1156

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
DIVISION OF STATE  
CORPORATIONS  
2001 APR 24 PM 1:34  
NOT RETURNED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING