## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

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## DOCUMENT # F93000000717

HOLROD REALTY HOLDING CORPORATION



Principal Place of Business

117 WEST 72ND STREET

**SUITE 5W** 

NEW YORK, NY 10023

Mailing Address

117 WEST 72ND STREET

SUITE 5W

NEW YORK, NY 10023

**FILED** Jul 11, 2008 08:00 AM **Secretary of State** 



07072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 13-2886378 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST SUITE 105 TALLAHASSE, FL 32301

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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

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOWIII FEE IS \$150.00 Due by September 12, 2008 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS PTD TITLE NICHOLSON, RONALD A NAME STREET ADDRESS 117 WEST 72ND STREET STE 5W CtTY-ST-ZIP NEW YORK, NY 10023 VPS TITLE NICHOLSON, JAMES A NAME STREET ADDRESS 117 WEST 72ND STREET STE 5W CITY-ST-ZIP NEW YORK, NY 10023 TITLE NAME STREET ADDRESS

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IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald A. Nicholson

President

07-07-08

Daytime Phone #