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Secretary of State
04-30-2007 90842 040 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G76228

1. Entity Name
HOLIDAY VILLAGE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6580 SEMINOLE BLVD. LOT 320 SEMINOLE, FL 33772	6580 SEMINOLE BLVD. LOT 320 SEMINOLE, FL 33772

04252007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2374188 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JONATHAN JAMES DAMONTE, CHRTD. 12110 SEMINOLE BLVD LARGO, FL 33778	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STEVENSON, KENNETH 6580 SEMINOLE BLVD #618 SEMINOLE, FL 33772	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Tracy Kohmann 6580 Seminole Blvd. #641 Seminole, FL 33772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LATRONICA, ED 6580 SEMINOLE BLVD #705 SEMINOLE, FL 33772	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President David Ash 6580 Seminole Blvd. #432 Seminole, FL 33772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KOHMANN, TRACY 6580 SEMINOLE BLVD #641 SEMINOLE, FL 33772	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Diahann Kanich 6580 Seminole Blvd. Lot 725 Seminole, FL 33772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WOODS, JANE 6580 SEMINOLE BLVD #407 SEMINOLE, FL 33772	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Shirley Sharp 6580 Seminole Blvd. #210 Seminole, FL 33772	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOKE, GEORDA 6580 SEMINOLE BLVD #120 SEMINOLE, FL 33772	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, LEROY 6580 SEMINOLE BLVD #202 SEMINOLE, FL 33772	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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: Shirley Sharp SHIRLEY SHARP 4-27-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #