

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H14856

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** HOOLEY FAMILY MANAGEMENT, INC.

**Current Principal Place of Business:**

707 NORTH ST RD 7  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

707 NORTH ST RD 7  
PLANTATION, FL 33317 US

**New Mailing Address:**

**FEI Number:** 59-2441916      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HOOLEY, MICHAEL E JR  
707 N STATE RD 7  
PLANTATION, FL 33317 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: VPT  
Name: HOOLEY, PATRICIA A  
Address: 707 N. STATE ROAD 7  
City-St-Zip: PLANTATION, FL 33317 US

Title: PS  
Name: HOOLEY, MICHAEL E JR  
Address: 707 N. STATE ROAD 7  
City-St-Zip: PLANTATION, FL 33317 US

Title: AS  
Name: HOOLEY, PATRICIA A  
Address: 707 N. STATE ROAD 7  
City-St-Zip: PLANTATION, FL 33317 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL E. HOOLEY JR.

PS

04/11/2012

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

\_\_\_\_\_  
Date