

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J29001

FILED  
Mar 23, 2006  
Secretary of State

Entity Name: HOLLEY & ASSOCIATES, INC.

## Current Principal Place of Business:

3370 GARDEN ST.  
P O BOX 6118  
TITUSVILLE, FL 327823118

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 6118  
TITUSVILLE, FL 32782 US

## New Mailing Address:

FEI Number: 59-2700199

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLLEY, TOM  
3370 GARDEN ST.  
TITUSVILLE, FL 32780 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HOLLEY, TOM,  
Address: 3370 GARDEN ST.  
City-St-Zip: TITUSVILLE, FL

Title: STD ( ) Delete  
Name: HOLLEY, PATRICE,  
Address: 3370 GARDEN ST.  
City-St-Zip: TITUSVILLE, FL

Title: V (X) Delete  
Name: HOLLEY, PATRICE,  
Address: 3370 GARDEN ST.  
City-St-Zip: TITUSVILLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTD (X) Change ( ) Addition  
Name: HOLLEY, TOM,  
Address: 3370 GARDEN ST.  
City-St-Zip: TITUSVILLE, FL

Title: S (X) Change ( ) Addition  
Name: HOLLEY, AMBER,  
Address: 3370 GARDEN ST.  
City-St-Zip: TITUSVILLE, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TOM HOLLEY

PVTD

03/23/2006

Electronic Signature of Signing Officer or Director

Date