

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J41005

FILED
Aug 01, 2005
Secretary of State

Entity Name: HOLLOWAY INSURANCE & FINANCIAL GROUP, INC.

Current Principal Place of Business:

12693 NEW BRITTANY BLVD
STE A
FT MYERS, FL 33907 US

New Principal Place of Business:

12784 YACHT CLUB CIRCLE
FT MYERS, FL 33919 US

Current Mailing Address:

12693 NEW BRITTANY BLVD
STE A
FT MYERS, FL 33907 US

New Mailing Address:

12784 YACHT CLUB CIRCLE
FT MYERS, FL 33919 US

FEI Number: 59-2756377

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLOWAY, STEVEN
12693 NEW BRITTANY BLVD
STE A
FT MYERS, FL 33907 US

Name and Address of New Registered Agent:

HOLLOWAY, STEVEN
12784 YACHT CLUB CIRCLE
FT MYERS, FL 33919 US

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: STEVEN HOLLOWAY

08/01/2005

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: HOLLOWAY, STEVEN N.,
Address: 12784 YACHT CLUB CIRCLE
City-St-Zip: FT MYERS, FL 33919

Title: D () Delete
Name: HOLLOWAY, STEVEN N.,
Address: 12784 YACHT CLUB CIRCLE
City-St-Zip: FT MYERS, FL 33919

Title: V () Delete
Name: HOLLOWAY, NORIS E.,
Address: 13310 MCGREGOR BLVD
City-St-Zip: FT MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: STEVEN HOLLOWAY

P

08/01/2005

Electronic Signature of Signing Officer or Director

Date