FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K11748

(6)

HOLLOWAY INVESTMENTS, INC. Principal Place of Business Mailing Address % JAMES C. HOLLOWAY % JAMES C. HOLLOWAY 118 BESSEMER CIRCLE 118 BESSEMER CIRCLE BRANDON FL 33511 BRANDON FL 33511-7853 3a. Date of Last Report 3. Date Incorporated or Qualified 01/06/1988 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2862544 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032. Yes No 24 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HOLLOWAY, JAMES C. 118 BESSEMER CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) BRANDON FL 33511 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) DELETE 1.1 TITLE Change TITLE HOLLOWAY, JAMES C. 1.2 NAME NAME 118 BESSEMER CIRCLE STREET ADDRESS 1.3 STREET ADDRESS **BRANDON FL** CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Chance Addition THLE 2.1 TITLE HOLLOWAY, PATRICIA L. 2.2 NAME NAME 118 BESSEMER CIRCLE STREET ADDRESS 2.3 STREET ADDRESS **BRANDON FL** 2. 4 CITY-ST-ZIP CHTY-ST-ZIP DELETE TiTLE SD 3.1 TITLE Change Addition HOLLOWAY, GEORGIA B. 3.2 NAME NAME 118 BESSEMER CIRCLE STREET ADORESS 3.3 STREET ADDRESS **BRANDON FL** CITY-ST-ZIP 34. CiTY-ST-ZIP DELETE Change 4.1 TITLE ☐ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DTY-ST-70 DELETE 51 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - \$1 - 712 5.4 CiTY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James C. Hollowsy, President

04/09/97 (813) 681-1232

Bayline Phone 4

FILED

Apr 22 1997 8:00am

Secretary of State