

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001314

FILED
Jan 06, 2009
Secretary of State

Entity Name: HOLIDAY SHORES BINGO ASSOCIATION, INC.

Current Principal Place of Business:

10274 S LAKE DRIVE
LARGO, FL 33773

New Principal Place of Business:

10274 S LAKE DRIVE
LARGO, FL 33773 US

Current Mailing Address:

10274 S LAKE DRIVE
LARGO, FL 33773

New Mailing Address:

10274 SO LAKE DR
LARGO, FL 33773 US

FEI Number: 20-1259912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PION, ARTHUR P
10274 SO. LAKE DR/
LARGO, FL 33773 US

Name and Address of New Registered Agent:

PION, ARTHUR P
10274 SO LAKE DR
LARGO, FL 33773 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:

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PION, ARTHUR
Address: 10274 S. LAKE DRIVE
City-St-Zip: LARGO, FL 33773

Title: VD () Delete
Name: PION, NANCY
Address: 10274 S. LAKE DRIVE
City-St-Zip: LARGO, FL 33773

Title: STD () Delete
Name: FACCENDA, ANTHONY
Address: 10290 S LAKE DR
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PION, ARTHUR
Address: 10274 S. LAKE DRIVE
City-St-Zip: LARGO, FL 33773 US

Title: VD (X) Change () Addition
Name: PION, NANCY
Address: 10274 S. LAKE DRIVE
City-St-Zip: LARGO, FL 33773 US

Title: STD (X) Change () Addition
Name: FACCENDA, ANTHONY
Address: 10290 S LAKE DR
City-St-Zip: LARGO, FL 33773 US

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTHUR P. PION

PD

01/06/2009

Electronic Signature of Signing Officer or Director

Date