2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT



FILED Apr 12, 2006 8:00 am y of State

	Secretary
	04-12-2006 900
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DOCUMENT # N05000000791 90 023 ****70.00 HOLDEN HEIGHTS COMMUNITY DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 400-**1224 26TH STREET** 1224 26TH STREET ORLANDO, FL 32805 ORLANDO, FL 32805 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02282006 Chg-NP CR2E037 (11/05) City & State 4. FEI Number 59-3798438 City & State Applied For Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRADLEY, L.C. 2631 MARQUISE CT. Street Address (P.O. Box Number is Not Acceptable) ORLANDO, FL 32805 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE . Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 IIII F ☐ Delete IIILE ☐ Change ■ Addition BRADLEY, L.C. NAME MAME STREET ADDRESS 2631 MARQUISE CT. STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32805 CITY-ST-ZIP IIILE ☐ Delete TITLE Change Addition STAPLETON, RHONDA NAME STREET ADDRESS **1217 22ND STREET** STREET ADDRESS CITY-ST-ZIP ORLNADO, FL 32805 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition BRIGHT, RUDOLPH NAME NAME STREET ADDRESS 1516 EAST HALICREST STREET #304 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32803 CITY+ST-ZIP TITLE ☐ Delete TID F ☐ Change ■ Addition MALLE BASS, SHELLA STREET ADDRESS 2403 SHORTLEAF CT. STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32818 CITY ST-ZIP вм TITLE Delete TITLE Addition ☐ Change GRIFFIN, JIM NAME NAMÉ STREET ADDRESS 301 SW 145TH ST STREET ADDRESS CITY-ST-7IP OCALA, FL 34473 CRTY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

AME OF SIGNING OFFICER OR DIRECTOR

407-244-0433