

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009940

FILED
Apr 30, 2009
Secretary of State

Entity Name: L.J. HOLLOWAY & ASSOCIATES, INC.

Current Principal Place of Business:

731 DUVAL STATION ROAD, SUITE 107-173
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

731 DUVAL STATION ROAD, SUITE 107-173
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 26-3640474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLOWAY, LASHONDA J
731 DUVAL STATION ROAD, SUITE 107-173
JACKSONVILLE, FL 32218 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLLOWAY, LASHONDA J
Address: 731 DUVAL STATION ROAD, SUITE 107-173
City-St-Zip: JACKSONVILLE, FL 32218

Title: S () Delete
Name: CLAYTON, DIONNE M
Address: 11778 E. HIGH PLAINS DRIVE
City-St-Zip: JACKSONVILLE BEACH, FL 32218

Title: T () Delete
Name: HAYNES, TOSHA D
Address: 9320 RIDGE BLVD.
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: CLAYTON, DIONNE M
Address: 11778 E. HIGH PLAINS DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

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

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: LASHONDA J. HOLLOWAY

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date