2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2005
Secretary of State

DOCUMENT# N33785

Entity Name: HOLIDAY SHORES ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 6453
MIRAMAR BEACH, FL 32550

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6453
MIRAMAR BEACH, FL 32550

New Mailing Address:

FEI Number: 59-2987123 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

AZZARELLO, DOTTIE
P.O. BOX 6453
MIRAMAR BEACH, FL 32550 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:	MAGEE, JOHN	
Address:	P.O. BOX 1347	
City-St-Zip:	DESTIN, FL 32550	
Title:	SEC	( ) Delete
Name:	AZZARELLO, DOTTIE A	
Address:	912 SHORE DRIVE	
City-St-Zip:	DESTIN, FL 32550	
Title:	STD	( ) Delete
Name:	SNOW, JANET	
Address:	980 SHORE DR	
City-St-Zip:	DESTIN, FL 32541	
Title:	D	( ) Delete
Name:	BAUGHMAN, JIM	
Address:	832 TARPON DR.	
City-St-Zip:	FORT WALTON BEACH, FL 32548	

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:	
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOTTIE AZZARELLO SEC 08/30/2005

Electronic Signature of Signing Officer or Director — Date