

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N40899

(9)

1. Corporation Name

HOLLOWAY PLACE HOMEOWNERS' ASSOCIATION, INC.

FILED

95 JAN 23 AM 9:43

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

Mailing Address

**308 ALEATHA DRIVE
DAYTONA BEACH FL 32114
US**

**308 ALEATHA DRIVE
DAYTONA BEACH FL 32114
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/16/1990

3a. Date of Last Report

08/19/1994

4. FEI Number

59-3111987

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**LIBRIZZI, MARTIN
308 ALEATHA DRIVE
DAYTONA BEACH FL 32114**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	LIBRIZZI, MARTIN
STREET ADDRESS	308 ALEATHA DRIVE
CITY-ST-ZIP	DAYTONA BEACH FL
TITLE	S
NAME	MONTELLA, ADAM
STREET ADDRESS	343 ALEATHA DRIVE
CITY-ST-ZIP	DAYTONA BEACH FL
TITLE	T
NAME	WILLIAMS, LES
STREET ADDRESS	328 ALEATHA DRIVE
CITY-ST-ZIP	DAYTONA BEACH FL
TITLE	D
NAME	SIMMONS, LARRY M.
STREET ADDRESS	384 ALEATHA DRIVE
CITY-ST-ZIP	DAYTONA BEACH FL
TITLE	D
NAME	MANNING, LEILA
STREET ADDRESS	309 ALEATHA DRIVE
CITY-ST-ZIP	DAYTONA BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Martín Librizzi* Martin Librizzi

1-13-95

(904) 253-3685