

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108541

FILED  
Apr 23, 2004  
Secretary of State

Entity Name: HIDEAWAY PIZZA OF NORTHWEST FLORIDA, INC.

## Current Principal Place of Business:

2387 W, HWY 98  
MARY ESTHER, FL 32569

## New Principal Place of Business:

24 EGLIN PKWY NE  
FT. WALTON BEACH, FL 32548

## Current Mailing Address:

8361 HWY 189 N  
BAKER, FL 32531

## New Mailing Address:

8369 HWY 189 N  
BAKER, FL 32531

FEI Number: 59-3680873

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLLAND, JOHN W  
8361 HWY 189 N  
BAKER, FL 32531 US

## Name and Address of New Registered Agent:

HOLLAND, JOHN W  
8369 HWY 189 N  
BAKER, FL 32531 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: JOHN W HOLLAND

04/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: HOLLAND, MYRA ANN  
Address: 8361 HWY 189 N  
City-St-Zip: BAKER, FL 32531

Title: DVP ( ) Delete  
Name: HOLLAND, JOHN W  
Address: 8361 HWY 189 N  
City-St-Zip: BAKER, FL 32531

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HOLLAND, MYRA A PRES  
Address: 8369 HWY 189 N  
City-St-Zip: BAKER, FL 32531

Title: DVP (X) Change ( ) Addition  
Name: HOLLAND, JOHN W VP  
Address: 8369 HWY 189 N  
City-St-Zip: BAKER, FL 32531

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

SIGNATURE: MYRA A HOLLAND

PRES

04/23/2004

Electronic Signature of Signing Officer or Director

Date