2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

May 02, 2003 8:00 am Secretary of State P01000067441 DOCUMENT # 05-02-2003 90715 013 ***150.00 1. Entity Name HOLIDAY RENTAL COMPANY, INC. Mailing Address Principal Place of Business 1104 N. COLLIER BLVD. 1104 N. COLLIER BLVD. MARCO ISLAND FL 33145 MARCO ISLAND FL 33145 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-3731919 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired - Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GRUESEL, JAMIE B 1104 N. COLLIER BLVD. MARCO ISLAND FL 33145 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 far the obligations of registered agent. SIGNATURE stered Agent signature required when reinstating) ed or printed name of registered agent and title if applicable FILE-NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. CR2E034 (10/02) ☐ Change Addition Delete TITLE TITLE BEATTY, ORANE NAME 1 NAME 1160 FAR WINDS STREET ADDRESS STREET ADDRESS MARCO ISLAND FL 34145 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change □ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P

I hereby certify that the information supplied with this filing does not qualify 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 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 pexecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

changed, or on an attachme

SIGNATURE

FILED