

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093376

FILED  
Sep 16, 2009  
Secretary of State

**Entity Name:** HOLIDAY & ASSOCIATES, INC.,.

**Current Principal Place of Business:**

1215 MANGO AVE  
SARASOTA, FL 34237

**New Principal Place of Business:**

1220 EAST AVE  
SARASOTA, FL 34237

**Current Mailing Address:**

1215 MANGO AVE  
SARASOTA, FL 34237

**New Mailing Address:**

1220 EAST AVE  
SARASOTA, FL 34237

**FEI Number:** 65-1140716

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

M B ACCOUNTING  
11706 U S 301 N  
THONOTOSASSA, FL 33592 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: HOLIDAY, ADAM C  
Address: 4844 BACCUS AVE  
City-St-Zip: SARASOTA, FL 34233

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

**SIGNATURE:** ADAM C HOLIDAY

PRES

09/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date