

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003776

FILED
Feb 13, 2008
Secretary of State

Entity Name: HOLMARK PROPERTIES, INC.

Current Principal Place of Business:

407 MAYFAIR PLACE
WINTER HAVEN, FL 33880

New Principal Place of Business:

105 HARBOR WAY
AUBURNDALE, FL 33823

Current Mailing Address:

PO BOX 2988
WINTER HAVEN, FL 33883

New Mailing Address:

FEI Number: 02-0560461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUSSEY, MARK
407 MAYFAIR PLACE
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

HUSSEY, MARK
105 HARBOR WAY
AUBURNDALE, FL 33823 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: MARK HUSSEY

02/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUSSEY, MARK
Address: 407 MAYFAIR PLACE
City-St-Zip: WINTER HAVEN, FL 33880

Title: VP () Delete
Name: HOLCOMB, LISA
Address: 407 MAYFAIR PLACE
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: MARK HUSSEY

MR

02/13/2008

Electronic Signature of Signing Officer or Director

Date