2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003827

FILED Jul 05, 2007 Secretary of State

| Entity Nar | me: HOLIDAY | 'HOUSE PROPERTIES, INC | | | |
|--|---|---|---|--|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| 2355 RADEN DRIVE LAND O LAKES, FL 34639 | | | | 5528 LAND O LAKES BLVD LAND O LAKES, FL 34639 | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| P.O. BOX LAND O LA | 1428 AKES, FL 346 | 39 | | | |
| FEI Number: | : 04-3612285 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | Address of C | current Registered Agent: | Name and Address of | of New Registered Agent: | |
| WINKLER, LYNN 2355 RADEN DRIVE LAND O LAKES, FL 34639 US | | | | WINKLER, LYNN 5528 LAND O LAKES BLVD LAND O LAKES, FL 34639 US | |
| | named entity : e of Florida. | submits this statement for the | purpose of changing its registere | d office or registered agent, or both, | |
| SIGNATURE: LYNN WINKLER | | | | 07/05/2007 | |
| | Electror | ic Signature of Registered A | gent | Date | |
| | | 3(2)(b), F.S., the corporation did i g Trust Fund Contribution (). | not receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D (WINKLER, LYN P.O BOX 1428 LAND O LAKES | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (WINKLER, BEF P.O BOX 1428 LAND O LAKES | | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: LYNN WINKLER 07/05/2007 D