

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000155637

FILED
Apr 23, 2008
Secretary of State

Entity Name: HOLIDAY FARMS HOMEOWNER ASSOCIATION, INC.

Current Principal Place of Business:

211 WRIGHT PARKWAY
FT WALTON BEACH, FL 32548

New Principal Place of Business:

1230 NW 43RD STREET
DEERFILED BEACH, FL 33064

Current Mailing Address:

211 WRIGHT PARKWAY
FT WALTON BEACH, FL 32548

New Mailing Address:

1230 NW 43RD STREET
DEERFILED BEACH, FL 33064

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HOINES, DAVID A
3081 E. COMMERCIAL BLVD
200A
FT LAUDERDALE, FL 33308 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: CHAPPER, DAVID E
Address: 211 WRIGHT PARKWAY
City-St-Zip: FT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: CHAPPER, DAVID E
Address: 1230 NW 43RD STREET
City-St-Zip: DEERFIELD BEACH, FL 30064

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: DAVID E CHAPPER

P/D

04/23/2008

Electronic Signature of Signing Officer or Director

Date