

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095967

Entity Name: HOLIDAYLINX CORP.

FILED  
Jan 07, 2011  
Secretary of State

**Current Principal Place of Business:**

5685 YOUNGQUIST RD  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

5685 YOUNGQUIST RD  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 20-5246670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRODERICK, EDWARD  
5685 YOUNGQUIST RD  
FORT MYERS, FL 33912 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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: BRODERICK, RICHARD  
Address: 5685 YOUNGQUIST RD  
City-St-Zip: FORT MYERS, FL 33912

Title: SEC  
Name: BRODERICK, EDWARD  
Address: 5685 YOUNGQUIST RD  
City-St-Zip: FORT MYERS, FL 33912

Title: PRES  
Name: BRODERICK, GARY  
Address: 5685 YOUNGQUIST RD  
City-St-Zip: FORT MYERS, FL 33912

Title: TREA  
Name: BRODERICK, EDWARD  
Address: 5685 YOUNGQUIST RD  
City-St-Zip: FORT MYERS, FL 33912

I hereby 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 all other like empowered.

SIGNATURE: EDWARD BRODERICK

TREA

01/07/2011

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

\_\_\_\_\_ Date