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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000059081 (6)

1. Corporation Name
HOLLEY HOUSE, INC.



Principal Place of Business
11396 SW 78TH CIRCLE
OCALA FL 34476

Mailing Address
11396 SW 78TH CIRCLE
OCALA FL 34476-9327

3. Date Incorporated or Qualified
08/01/1995

3a. Date of Last Report
05/28/1996

2. Principal Place of Business

21 11396 SW 78th Cir.

Suite, Apt. #, etc.

22 City & State
Ocala FL

23 Zip
34476

Country

25 USA

2a. Mailing Address

26 11396 SW 78th Cir.

Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29 34476

30 USA

4. FEI Number
59-3330170

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

HOLLEY, CATHE M
11396 SW 78TH CIRCLE
OCALA FL 34476

10. Name and Address of New Registered Agent

81 Name Cathe M. Holley
82 Street Address (P.O. Box Number is Not Acceptable)
11396 SW 78th Cir.
83
84 City Ocala FL 85 Zip Code 34476

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME HOLLEY, CATHE M
STREET ADDRESS 11396 SW 78TH CIRCLE
CITY-ST-ZIP Ocala FL 34476

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Cathe M. Holley 04/28/97 (352)

CR2E034 (9/96)