2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000096185

Entity Name: JAMES D. A. HOLLEY & CO., P.A.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2878 MAH. TALLAHAS	AN DR SSEE, FL 323	085410			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2878 MAH. TALLAHAS	AN DR SSEE, FL 323	085410			
FEI Number:	59-3348344	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
239 EAST TALLAHAS The above	W. BRADLE\ VIRGINIA STE SSEE, FL 323 named entity of Florida.	REET 01 US	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUF	RE:				
	Electro	nic Signature of Registered Ager	nt	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (MADDEN, JOH 3061 WHITE IE TALLAHASSEE	BIS WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PARMELEE, G	KESHORE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	HARPER, L. M	WOODS DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (PENNINGTON, 2016 DOOMAF TALLAHASSEE	RDRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (GILBERT, MAT PO BOX 13796 TALLAHASSEE	3	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN A. MADDEN PRES 01/04/2005