

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000096185

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

FILED
Jan 15, 2007
Secretary of State

Current Principal Place of Business:

2878 MAHAN DR
TALLAHASSEE, FL 323085410

New Principal Place of Business:

2606 CENTENNIAL PLACE
TALLAHASSEE, FL 32308

Current Mailing Address:

2878 MAHAN DR
TALLAHASSEE, FL 323085410

New Mailing Address:

2606 CENTENNIAL PLACE
TALLAHASSEE, FL 32308

FEI Number: 59-3348344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNROE, W. BRADLEY
239 EAST VIRGINIA STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: MADDEN, JOHN A
Address: 3061 WHITE IBIS WAY
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: PARMELEE, GWYNNE Y
Address: 3365 EAST LAKESHORE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: HARPER, L. MCRAE
Address: 2516 BETTON WOODS DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: PENNINGTON, CHARLES W
Address: 2016 DOOMAR DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: GILBERT, MATTHEW H
Address: PO BOX 13796
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN A. MADDEN

PRES

01/15/2007

Electronic Signature of Signing Officer or Director

Date