FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000024620

HOLLEY CONSTRUCTION, INC.

Principal Place	e of Business	Mailing Address					: 製售機能	
0.1 17.10.10.1 1.11.10.L		911 WAGNER AVENUE FORT PIERCE FL 34982	• • • • • • • • • • • • • • • • • • • •				, ,	
						DO NOT WRITE IN	THIS SPACE!	•
						3. Date Incorporated or Qualifed		1
						03/19/1996		
Principal Place of Business 2a. Mailing Addre						4. FEI Number		pplied For
21		26				65-0670161		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	•	Additional equired
City & State	e	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added	to Fees
Zip Country Zip			Country			8. This corporation owes the current y	ear Intangible	
24	25	29 36	o .			Personal Property Tax.	Yes '	□No
	9. Name and Address of Current		'			10. Name and Address of New Regis		
			8	11 P	Name		1 'n1	. [
RAINEY, VERNON					<u></u>	(D.O. Day Number in Net Assessable)	1	
911 WAGNER AVENUE			8:	2 3	Street Addre	ss (P.O. Box Number is Not Acceptable)	4	
FORT PIERCE FL 34982			8:	13		· · · · · · · · · · · · · · · · · · ·	11 (44.5) (4.5)	614 St. St.
						(2) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		學問題,特別科對
			8	4 (City	医自己性性 医二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	E 1 85 ₹P	Code 1111
<u> </u>	607.850) COZ (EOD Florido Ctotutos	the ebe) /O P	omed cores	ration submits this statement for the purp	ose of changing it	s registered
office or r	egistered agent, or both, in the State of	of Florida. Such change was auth	iorized b	y the	e corporation	n's board of directors. I hereby accept the	appointment as r	egistered
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statute	es.			* in a state of the state of th	
SIGNATURE								·
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regi					gnature required	when reinstating) D ADDITIONS/CHANGES TO OFFICE	ATE	OPS IN 12
12.	OFFICERS AND DIRECTORS		13. 1,1 TITLE				Change	
TITLE ·	D	_				43.47	Onlango	
NAME	rainey, vernon		1.2 NAME	E				. [
STREET ADDRESS	911 WAGNER AVENUE		1.3 STRE	ET AD	ODRESS			. 1
CITY-ST-ZIP	FORT PIERCE FL 34982		1.4 CITY-ST-ZIP		JP .			
TITLE	D	☐ DELETE	2.1 TITLE	1			Change	☐ Addition
NAME	HOLLEY, FRANK		2.2 NAME	E	}		÷	ļ
STREET ADDRESS	1206 FLEETWOOD LANE	•	2.3 STRE	ET AD	OORESS		- <u>- </u>	ì
CITY-ST-ZIP	FORT PIERCE FL 34982		2. 4 CITY	/- ST- Z	ZIP		<u>. 51.</u>	
TITLE		☐ DELETE	3.1 TITLE	=			☐ Change	☐ Addition
NAME	a f		3.2 NAME	E			1 14	
STREET ADDRESS			3.3 STRE	ETAD	DORESS	s e e e e e e e e e e e e e e e e e e e	ore and the state of the state	12 10 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1
CITY-ST-ZIP	· ·		3.4. CITY			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	的技術學和問	
TITLE		☐ DELETE	4.1 TITLE			10. (16. 2) 人名英格兰	Change	ੁ ਨੂੰ ∏ Addition
NAME		_	4. 2 NAM				· 清川 開於	
STREET ADDRESS			4.3 STRE		ODRESS		4.4	
O LYCE I WULKESS!	l .		E 1.0 O 1 L	, , ,				

CITY-ST-ZIP 14. I 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 the 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, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

ED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

□ DELETE

FILED

Feb 12, 1999 8:00am

Secretary of State

02-12-1999 90010 035 ***150.00

561-461-0618

☐ Change

☐ Change

Addition

Addition