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Sep 23 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 # P96000031238 (4)

1. Corporation Name
VANDERHOLLY, INC.



Principal Place of Business

~~3 HANOVER SQUARE~~
~~SUITE 110~~
~~NEW YORK NY 10004~~

Mailing Address

~~3 HANOVER SQUARE~~
~~SUITE 110~~
~~NEW YORK NY 10004-2022~~

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 24744 Wallybrin Ln.
23 City & State
Bonita Springs, FL
24 Zip
34134
25 Country
USA

2a. Mailing Address

26 45 Wall St.
27 Suite, Apt. #, etc.
Ste. 1413
28 City & State
NY, NY
29 Zip
10005
30 Country
USA

3. Date Incorporated or Qualified
04/04/1996

3a. Date of Last Report

4. FEI Number

58-2237099

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. 199.03,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

PEEPLS, C. PERRY ESQ.
800 LAUREL OAK DRIVE
SUITE 400
NAPLES FL 33963-2738

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
VANDERWERF, SELENA
~~3 HANOVER SQUARE, SUITE 110~~
~~NEW YORK NY 10004~~

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
45 Wall St, Ste. 1413
NY, NY 10005

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 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.

SIGNATURE: *Selema Vanderwerf* SELEMA VANDERWERF

CR2E034 (9/96)