

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

FILED

May 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000055675 (8)

1. Corporation Name

HOLLEY GRADING, INC.

Principal Place of Business

5330 4TH AVENUE S.W.  
NAPLES FL 34119  
US

Mailing Address

5330 4TH AVENUE S.W.  
NAPLES FL 34119  
34119

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21 5330 Palmetto woods Dr.	26 5330 Palmetto woods Dr.	07/01/1996	65-0678906	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	6. Election Campaign Financing	Trust Fund Contribution
22	27	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State	City & State	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
23 Naples, Fla.	28 Naples, Fla.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Zip			
24 34119	29 34119			
Country	Country			
25 Coll: or	30 Collier			

9. Name and Address of Current Registered Agent

HOLLEY, MICHAEL  
5330 4TH AVENUE S.W. PALMETTO WOODS DRIVE  
NAPLES FL 34119

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	CITY-ST-ZIP	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 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:

*Michael B. Holley*  
Signature, typed or printed name of signing officer or director

*Owner Pres*

941-353-2303

CR2E034 (10/97)