

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S26222

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: DWIGHT HOLLOWAY & CO.

## Current Principal Place of Business:

114 SOUTH PARK CIRCLE  
SUITE D  
WINTER PARK, FL 32789 US

## New Principal Place of Business:

2499 VIA TUSCANY  
WINTER PARK, FL 32789 US

## Current Mailing Address:

114 SOUTH PARK CIRCLE  
SUITE D  
WINTER PARK, FL 32789 US

## New Mailing Address:

P.O. BOX 3300  
WINTER PARK, FL 32790 US

FEI Number: 59-3053665

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CFRA, LLC  
4221 W. BOY SCOUT BLVD., 10TH FLOOR  
TAMPA, FL 33607 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: SDP ( ) Delete  
Name: HOLLOWAY, DWIGHT D PRESID  
Address: 114 SOUTH PARK AVENUE SUITE D  
City-St-Zip: WINTER PARK, FL 32789

Title: S ( ) Delete  
Name: HOLLOWAY, CYNTHIA A SHAREHO  
Address: 114 SOUTH PARK AVENUE SUITE D  
City-St-Zip: WINTER PARK, FL 32789

Title: SDVP ( ) Delete  
Name: BRETZKE, DAVID W SHAREHO  
Address: 114 SOUTH PARK AVENUE SUITE D  
City-St-Zip: WINTER PARK, FL 32789

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SDP (X) Change ( ) Addition  
Name: HOLLOWAY, DWIGHT D PRESID  
Address: 2499 VIA TUSCANY  
City-St-Zip: WINTER PARK, FL 32789

Title: S (X) Change ( ) Addition  
Name: HOLLOWAY, CYNTHIA A SHAREHO  
Address: 2499 VIA TUSCANY  
City-St-Zip: WINTER PARK, FL 32789

Title: SDVP (X) Change ( ) Addition  
Name: BRETZKE, DAVID W SHAREHO  
Address: P.O. BOX 3300  
City-St-Zip: WINTER PARK, FL 32790

I hereby certify that the information supplied with this filing does not qualify 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: DWIGHT D HOLLOWAY

PRES

04/25/2008

Electronic Signature of Signing Officer or Director

Date