



HOLIDAY UTILITIES
 P.O. BOX 398
 NEW PORT RICHEY, FL

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Total Pages 000000001	Events Filed 000000000	FEI Number NONE

No Filing History

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Owner Information

Name & Address	FEI Number	Charter Number
HOLIDAY UTILITY COMPANY, INC. P.O. BOX 398 NEW PORT RICHEY, FL	20-000RR21	349899
HOLIDAY WATERWORKS CORPORATION P.O. BOX 398 NEW PORT RICHEY, FL	20-0040769	P03000043708

Document Images

Listed below are the images available for this filing.

G04138700159 -- 05/17/2004 -- REGISTRATION

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT



NOTIFICATION FOR REGISTRATION OF FICTITIOUS NAME
 Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. **Holiday Utilities**
 Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")
PO Box 398

Mailing Address of Business
New Port Richey, Florida
 City State Zip Code

3. Florida County of principal place of business: Pasco
(see instructions if more than one county)

4. FEI Number: N/A

This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1. Last First M.I. Address City State Zip Code

2. Last First M.I. Address City State Zip Code

B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1. **Holiday Utility Company, Inc.**
 Entity Name
PO Box 398
 Address
New Port Richey, FL 3
 City State Zip Code
 Florida Registration Number 349899
 FEI Number: 20-0008821
 Applied for Not Applicable

2. **Holiday Waterworks Corporation**
 Entity Name
PO Box 398
 Address
New Port Richey, FL
 City State Zip Code
 Florida Registration Number P03000043708
 FEI Number: 20-0040769
 Applied for Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

[Signature] 5/13/07
 Signature of Owner Date
 Phone Number: 727-919-0408

[Signature] 5/13/07
 Signature of Owner Date
 Phone Number: 727-919-0408

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Section 4

**FOR CANCELLATION COMPLETE SECTION 4 ONLY:
 FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:**

I (we) the undersigned, hereby cancel the fictitious name _____
 _____, which was registered on _____ and was assigned
 registration number _____

 Signature of Owner Date

 Signature of Owner Date

Mark the applicable boxes Certificate of Status — \$10 Certified Copy — \$30
FILING FEE: \$50