


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 03, 2006 8:00 am**  
**Secretary of State**

02-03-2006 90007 042 \*\*\*\*61.25

<b>DOCUMENT # 715518</b> 1. Entity Name <b>BEVERLY HILLS CONDOMINIUM NUMBER FOUR, INC.</b>					
Principal Place of Business <b>5300 WASHINGTON ST. HOLLYWOOD, FL 33021</b>			Mailing Address <b>5300 WASHINGTON ST F-311 HOLLYWOOD, FL 33021 US</b>		
2. Principal Place of Business		3. Mailing Address <b>5300 Washington St.</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. <b>F-111</b>			
City & State 		City & State <b>HOLLYWOOD, FL</b>			
Zip 	Country 	Zip <b>33021</b>	Country <b>USA</b>	4. FEI Number <b>59-1629263</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent <b>KAMEROW, JOSEPH H 5300 WASHINGTON ST F-311 S213 HOLLYWOOD, FL 33021</b>				7. Name and Address of New Registered Agent Name <b>Karen Brown</b> Street Address (P.O. Box Number is Not Acceptable) <b>5300 Washington St</b> <b>Apt F-111</b> City <b>HOLLYWOOD</b> <b>FL</b> Zip Code <b>33021</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><b>Karen Brown, Treas.</b></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				<u><b>1/27/06</b></u> <small>DATE</small>	
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARBINI, MADELINE 5300 WASHINGTON ST, F-220 HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KAMEROW, JOSEPH 5300 WASHINGTON ST, F-311 HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LA SALLE, THOMAS J 5300 WASHINGTON ST, E-202 HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BROWN, KAREN 5300 WASHINGTON ST, F-111 HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LEVENTHAL, ANDRE 5300 WASHINGTON ST, F-315 HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDREA LEVENTHAL 5300 Washington St, F-315 HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MADELINE BARBINI 5300 WASHINGTON ST, F 220 HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JULIO GAVILAN 5300 WASHINGTON ST-E 308 HOLLYWOOD, FL 33021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KAREN BROWN 5300 WASHINGTON ST, F111 HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOSEPH KAMEROW 5300 Washington St-F311 HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	   	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <u><b>Karen Brown</b></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<u><b>1/27/06</b></u> <small>Date</small>	
				<u><b>954-295-3771</b></u> <small>Daytime Phone #</small>	