2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 8:00 am Secretary of State

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1. Entity Name



5300 MAINTENANCE AND MANAGEMENT CORPORATION 60018961 Principal Place of Business Mailing Address 5300 WASHINGTON STREET 5300 WASHINGTON STREET HOLLYWOOD, FL 33021-8046 HOLLYWOOD, FL 33021-8046 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02152006 Chg-NP CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 59-1495451 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TERESA CONZALEZ SCARAMUZZI, VINCENT Street Address (P.O. Box Number is Not Acceptable) 5300 WASHINGTON ST. D201 5300 WASHINGTON HOLLYWOOD, FL 33021 MAIN OFFI +Ollywood 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 regist j., 4.1 SIGNATURE Signature, typed of printed name of registered agent and title if apt MOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. \Box Florida Department of State Due by May 1, 2006 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE **⊠** Delete TITLE ■ Addition VINCENT SCARAMUZZI SCARAMUZZI, VINCENT NAME NAME 5300 WASHINGTON ST D201 STREET ADDRESS STREET ADDRESS 5300 WASHINGTON ST. D201 CITY-ST-ZIE HOLLYWOOD, FL 330218046 CITY-ST-ZIP FL 33021 HOLLYWOOD *Change ☑ Delete TITLE ☐ Addition TRIPPODO, ROSEMARY NAME NAME ROSEMARIE, TRIPPODO 5300 WASHINGTON ST M HOLLY WOOD FL 3202 STREET ADDRESS 5300 WASHINGTON ST M103 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 330218046 CITY-ST-ZIP ☐ Change **▼** Addition TITLE Delete TITLE NAME MURAGLIA, MARTHA NAME LILIAM TRIPP 5300 WASHINGTOM R 110 STREET ADDRESS 5300 WASHINGTON ST. R306 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-7IP HOLLY wood TITLE ΤĐ TITI F Change ☐ Addition Delete HAZEL, JEAN G NAME NAME LINDA SHERWOOD 5300 WASHINGTON ST. D-104 5300 WASHINGTON ST. O224 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33021 CITY-ST-ZIP HOLLYWOOD, FL 33021 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Defete TITLE NAME NAME PAUL, CRESS STREET ADDRESS STREET ADDRESS WASHINGTON 5300 CITY-ST-ZIP CITY-SI-ZIP FL TITLE Delete · TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 attachpen, with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Daytime Phone #