

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728342

FILED
Feb 03, 2009
Secretary of State

Entity Name: 5300 MAINTENANCE AND MANAGEMENT CORPORATION

Current Principal Place of Business:

5300 WASHINGTON STREET
HOLLYWOOD, FL 330218046

New Principal Place of Business:

5300 WASHINGTON STREET
CLUB HOUSE
HOLLYWOOD, FL 330218046

Current Mailing Address:

5300 WASHINGTON STREET
HOLLYWOOD, FL 330218046

New Mailing Address:

5300 WASHINGTON STREET
CLUB HOUSE
HOLLYWOOD, FL 330218046

FEI Number: 59-1495451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, TERESA
5300 WASHINGTON ST.
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

GONZALEZ, TERESA
5300 WASHINGTON ST.
CLUB HOUSE
HOLLYWOOD, FL 33021 US

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: TERESA GONZALEZ

02/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCARAMUZZI, VINCENT
Address: 5300 WASHINGTON ST D201
City-St-Zip: HOLLYWOOD, FL 33021

Title: V () Delete
Name: TRIPPODO, ROSEMARIE
Address: 5300 WASHINGTON ST M103
City-St-Zip: HOLLYWOOD, FL 33021

Title: V () Delete
Name: TRIPP, LILIAM
Address: 5300 WASHINGTON ST R110
City-St-Zip: HOLLYWOOD, FL 33021

Title: S () Delete
Name: EVANDOFF, CATHERINE
Address: 5300 WASHINGTON ST #Q202
City-St-Zip: HOLLYWOOD, FL 33021

Title: T () Delete
Name: CRESS, PAUL
Address: 5300 WASHINGTON ST #P335
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSEMARIE, TRIPPODO
Address: 5300 WASHINGTON ST M 103
City-St-Zip: HOLLYWOOD, FL 33021

Title: V (X) Change () Addition
Name: LILLIAN, TRIPP
Address: 5300 WASHINGTON ST R 110
City-St-Zip: HOLLYWOOD, FL 33021

Title: V (X) Change () Addition
Name: THOMAS J., LASALLE
Address: 5300 WASHINGTON ST E202
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LILLIAN TRIPP

V

02/03/2009

Electronic Signature of Signing Officer or Director

Date