2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Jan 28, 2004 08:00 AM **DOCUMENT # 740587** 1. Entity Name **Secretary of State** HOLLY COURT AT WOODMONT, A CONDOMINIUM ASSOCIATION, INC., A FLORIDA NON-PROFIT Principal Place of Business Mailing Address OFFICE-POOLSIDE 8795 HOLLY COURT TAMARAC FL 33321 OFFICE-POOLSIDE 8795 HOLLY COURT TAMARAC FL 33321 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FFI Number 59-1891340 Not Applicable Country Zιρ Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FEINBERG, LAWRENCE 8770 HOLLY CT #6-201 Street Address (P.O. Box Number is Not Acceptable) TAMARAC FL 33321 City Zip Code 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. (NOTE, Registered Agent signature required when reinstating) Signature typed or printed name of registored agent and little if applicable DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Fiorida Department of State Due By May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Change Addition TITLE ☐ Delete TITLE LEFF, PHILIP NAME NAME U00000016750 8760 HOLLY COURT STREET ADDRESS STREET ADDRESS 01/28/04-80068-012 61.25 TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-718 Delete TITLE Change ☐ Addition TITLE FEINBERG, LAWRENCE NAME NAME 8770 HOLLY COURT STREET ADDRESS STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE LEVINE, MERVYN NAME NAME 8751 HOLLY COURT STREET ADDRESS STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-ZIP PD ☐ Addition TITLE ☐ Delete LEVINE, ROSALYN NAME NAME 8799 HOLLY COURT STREET ADDRESS STREET ADDRESS TAMARAC FL 32321 CITY - ST - ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition LAZAR, S. NAME NAME 8780 HOLLY CORT STREET ADDRESS STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition ZANCO, ANGELO NAME NAME 8751 HOLLY COURT STREET ADDRESS STREET ADDRESS TAMARAC FL 33321 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

OFFICER OR DIRECTOR

1/21/04

Davime Phone #