

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006006

FILED  
Aug 20, 2007  
Secretary of State

Entity Name: 1353 HOLLY HEIGHTS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

318 INDIAN TRACE, #109  
WESTON, FL 33326

**New Principal Place of Business:**

1353 HOLLY HEIGHTS DRIVE  
UNIT # 2  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

318 INDIAN TRACE, #109  
WESTON, FL 33326

**New Mailing Address:**

1353 HOLLY HEIGHTS DRIVE  
UNIT # 2  
FORT LAUDERDALE, FL 33304

FEI Number: 20-5112743      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MASTRIANA & CHRISTIANSEN, P.A.  
1500 N. FEDERAL HWY., STE. 200  
ATTN: STEPHEN V. HOFFMAN  
FT. LAUDERDALE, FL 33304 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: AMOS, JOHN E. III  
Address: 318 INDIAN TRACE, #109  
City-St-Zip: WESTON, FL 33326

Title: DT ( ) Delete  
Name: CLINE, JAMES L.  
Address: 318 INDIAN TRACE, #109  
City-St-Zip: WESTON, FL 33326

Title: DVS ( ) Delete  
Name: SANDERS, KENNETH W.  
Address: 318 INDIAN TRACE, #109  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: SANDERS, KENNETH  
Address: 3322 LAKESIDE DRIVE  
City-St-Zip: DAVIE, FL 33328

Title: DT (X) Change ( ) Addition  
Name: KRISTOFIC, ROBERT  
Address: 1353 HOLLY HEIGHTS DRIVE, UNIT # 2  
City-St-Zip: WESTON, FL 33326

Title: DVS (X) Change ( ) Addition  
Name: FRANCIS, CHRISTINE  
Address: 1353 HOLLY HEIGHTS DRIVE, UNIT # 5  
City-St-Zip: FORT LAUDERDALE, FL 33328

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: KENNETH SANDERS

DP

08/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date