2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 12, 2002 8:00 am § **DOCUMENT # N9400002997 Secretary of State** 1. Entity Name THE HOLLOW HOMEOWNERS ASSOCIATION, INC. 03-12-2002 90996 049 ****61.25 Principal Place of Business Mailing Address Q/Q CONTINENTAL GROUP LTD C/O CONTINENTAL GROUP LTD 1027 SHOTGUN ROAD 1067 SHOTGUN ROAD SUNRISE FL 33326 SUNRISE FL 33326 :US US 2. Principal Place of Business 3. Mailing Address 2950 N 28 Terrace 2950 N 28 Terrace Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Hollywood, FL City & State 4. FEI Number Applied For 65-0571477 Hollywood, FL Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33020 33020 USA Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Dennis Eisinger TUDZAROV. LOUISE Street Address (P.O. Box Number is Not Acceptable) **045 W OAKLAND PARK BLVD** FORT LAUDERDALE FL 33311 4000 Hollywood Blvd, Ste 265-S ~33029 Hollvwood 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. 2/27/02 SIGNATURE Signature, typed or printed name of registered nd title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change Addition CR2E037 (9/01) TITLE X Delete TITLE DIEZ. MANNY Milch, Michelle NAME NAME 2991 HIDDEN HOLLOW LANE 3150 Hidden Hollow Lane STREET ADDRESS STREET ADDRESS **DAVIE FL 33328** CITY-ST-ZIP CITY-ST-ZIP Davie, FL 33328 TITI F Delete TITLE ☐ Change X Addition Keno, Debbie MILCH. MICHELLE NAME NAME 3201 Hidden Hollow Lane 3150 HIDEN HOLLOW LANE STREET ADDRESS STREET ADDRESS DAVIE FL 33328 Davie, FL 33328 CITY-ST-ZIP CITY-ST-ZIP ST TITLE □ Delete TITLE Addition VALDEZ, VICTORIA Wakat, Susan NAME NAME 3130 HIDDEN HOLLOW LANE 3151 Hidden Hollow Lane STREET ADDRESS STREET ADDRESS DAVIE FL 33328 CITY-ST-ZIP CITY-ST-ZIP Davie, FL 33328 ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 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 withing address with all other like purpowered.

MICHELLE MILCH

FILED