

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000006006

**FILED**  
**May 24, 2013**  
**Secretary of State**  
**CC2282389010**

**Entity Name:** 1353 HOLLY HEIGHTS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

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

**FEI Number:** 20-5112743

**Certificate of Status Desired:** No

**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

*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

**Officer/Director Detail :**

Title           DPT  
Name           KRISTOFIC, ROBERT  
Address        1353 HOLLY HEIGHTS DRIVE, UNIT #2  
City-State-Zip: FORT LAUDERDALE FL 33304

Title           DV  
Name           NEEB, VOLKMAR  
Address        2317 NW 7 AV  
City-State-Zip: WILTON MANORS FL 33311-3722

Title           DS  
Name           SPIEK, DENNIS  
Address        158 N MCKEAN ST  
City-State-Zip: KITTANNING PA 16201

*I hereby 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 all other like empowered.*

**SIGNATURE: ROBERT KRISTOFIC**

**PRESIDENT**

**05/24/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date