

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15708

Entity Name: THE HOLLYWOOD BEACH RESORT CONDOMINIUM ASSOCIATION, INC.**FILED**
Apr 13, 2015
Secretary of State
CC6617139308**Current Principal Place of Business:**101 N. OCEAN DRIVE
SUITE #8
HOLLYWOOD, FL 33019**Current Mailing Address:**101 N. OCEAN DRIVE
#8
HOLLYWOOD, FL 33019 US**FEI Number: 59-2700531****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WEISS SEROTA & HELFMAN
200 EAST BROWARD BLVD.
1900
FORT LAUDERDALE, FL 33301 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 | P |
| Name | LEVY, KEN |
| Address | 101 N. OCEAN DRIVE, #8 |
| City-State-Zip: | HOLLYWOOD FL 33019 |

| | |
|-----------------|------------------------|
| Title | S |
| Name | SCHWARTZMAN, VALERIA |
| Address | 101 N. OCEAN DRIVE, #8 |
| City-State-Zip: | HOLLYWOOD FL 33019 |

| | |
|-----------------|------------------------|
| Title | D |
| Name | MATA, PAUL |
| Address | 101 N. OCEAN DRIVE, #8 |
| City-State-Zip: | HOLLYWOOD FL 33019 |

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|-----------------|--------------------------------|
| Title | DIRECTOR |
| Name | ASTAFUROVA, LANA |
| Address | 101 N. OCEAN DRIVE SUITE #8 |
| City-State-Zip: | HOLLYWOOD FL 33019 |

| | |
|-----------------|--------------------|
| Title | VP |
| Name | SCROGGINS, WANDA |
| Address | 101 N. OCEAN DRIVE |
| City-State-Zip: | HOLLYWOOD FL 33019 |

| | |
|-----------------|--------------------------------|
| Title | T |
| Name | FISHER, ANDREW |
| Address | 101 N. OCEAN DRIVE SUITE #8 |
| City-State-Zip: | HOLLYWOOD FL 33019 |

| | |
|-----------------|--------------------------------|
| Title | DIRECTOR |
| Name | MATA, SKYE |
| Address | 101 N. OCEAN DRIVE SUITE #8 |
| City-State-Zip: | HOLLYWOOD FL 33019 |

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: KEN LEVY**P****04/13/2015**

Electronic Signature of Signing Officer/Director Detail

Date