

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49182

Entity Name: HOLLYWOOD HILLS CIVIC ASSOCIATION, INC.**Current Principal Place of Business:**108 N 33RD AVENUE
DAVID PARK COMMUNITY CENTER
HOLLYWOOD, FL 33020**Current Mailing Address:**P O BOX 81-6044
HOLLYWOOD, FL 33080 60**FEI Number:** 65-0123657**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHATTERSON, BEVERLY JEAN
3500 CLEVELAND ST
HOLLYWOOD, FL 33021 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:** BEVERLY CHATTERSON

01/17/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MARSHALL, JAMES
Address 5400 LINCOLN STREET
City-State-Zip: HOLLYWOOD FL 33021

Title VP
Name BURGIO, PAM
Address 2131 N 54TH AVENUE
City-State-Zip: HOLLYWOOD FL 33021

Title TREASURER
Name CHATTERSON, BEVERLY
Address 3500 CLEVELAND STREET
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR
Name PODESTA, MARDI
Address 4507 PIERCE ST
City-State-Zip: HOLLYWOOD FL 33021

Title SECRETARY
Name FARINHAS, SUSAN
Address 5000 PIERCE ST
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR
Name PRINDIVILLE, RICK
Address 5110 MONROE STREET
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR
Name BILOTTI, ARTHUR
Address 2120 N 36 AVENUE
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR
Name HARRIS, JOHN
Address 4600 SHERIDAN STREET
 SUITE 403
City-State-Zip: HOLLYWOOD FL 33021

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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: BEVERLY J CHATTERSON

TREASURER

01/17/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MITES CAMPBELL, MARY DR.
Address 5207 GRANT STREET
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR
Name CARRASCO, ALEX
Address 1920 N 52ND AVENUE
City-State-Zip: HOLLYWOOD FL 33021