

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702357

FILED
Apr 27, 2009
Secretary of State

Entity Name: HOLLYWOOD TERRACE APTS, INC.

Current Principal Place of Business:

2325 GARFIELD ST
APT 10
HOLLYWOOD, FL 330200446 US

New Principal Place of Business:

Current Mailing Address:

2114 N 32 AVENUE
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 59-2750382 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN A AUNER
2114 N 32 AVENUE
HOLLYWOOD, FL 33021 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: D () Delete
Name: HANS, KLARMANN
Address: 2325 GARFIELD ST APT 12
City-St-Zip: HOLLYWOOD, FL 33020

Title: P () Delete
Name: BENN, PATRICK
Address: 11596 NW 19 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: DEPECOL, MARIO
Address: 23225 GARFIELD ST APT 11
City-St-Zip: HOLLYWOOD, FL 33020

Title: VP () Delete
Name: AUNER, GALE
Address: 2114 N 32ND AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: ST () Delete
Name: AUNER, JOHN
Address: 2114 N 32 AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN A AUNER

ST

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date