

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90153 023 ****61.25

DOCUMENT # 704209

1. Entity Name
HILLSBORO-INLET APT., INC.



Principal Place of Business
**HILLSBORO - INLET APT., INC.
2501 N. OCEAN BLVD.
POMPANO BEACH, FL 33062**

Mailing Address
**2900 E OAKLAND PK BLVD
#103
FT LAUDERDALE, FL 33306 US**



04302008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1119276

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DAVID E. BUCK
2900 E. OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33306**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERREIRA, JACQUELINE 1501 N OCEAN BLVD 10 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MURPHY, DAN 2501 N. OCEAN BLVD., #11 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SOLITRO, LEONARD 2501 N OCEAN BLVD #20 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VITALE, JOSEPH 2501 N OCEAN BLVD 12 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GONZALEZ, JERI 2501 N OCEAN BLVD 2 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CYR, CHRIS 2501 N OCEAN BLVD #16 POMPANO BEACH, FL 33062

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 with an address, with all other like empowered.

SIGNATURE: DAN MURPHY **DAN MURPHY PRESIDENT** 4/30/08 (954) 561-3303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #