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**Mar 06 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 708146 (6)

1. Corporation Name
HILLSBORO COLONNADE, INC.



Principal Place of Business 1161-A1A HILLSBORO BEACH FL 33062	Mailing Address 1161-A1A HILLSBORO BEACH FL 33062
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3. Date Incorporated or Qualified 11/23/1964	
4. FEI Number 59-1167815	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent

**POLIAKOFF, GARY A.
3111 STIRLING ROAD
FT. LAUDERDALE FL 33312**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> DELETE
NAME	GROB, EMIL (JIM)	
STREET ADDRESS	1161 HILLSBORO MILE	
CITY-ST-ZIP	HILLSBORO BCH. FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	HENNING, HOWARD	
STREET ADDRESS	1161 HILLSBORO MILE	
CITY-ST-ZIP	HILLSBORO BCH. FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	RIVERA, DAVID	
STREET ADDRESS	1161 HILLSBORO MILE	
CITY-ST-ZIP	HILLSBORO BCH. FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WILLIAMS, SCOTT	
STREET ADDRESS	1161 OCEAN BLVD.	
CITY-ST-ZIP	HILLSBORO BCH. FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MCCANN, CAROLYN	
STREET ADDRESS	1161 OCEAN BLVD.	
CITY-ST-ZIP	HILLSBORO BCH. FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	THOMAS, MAJORIE	
STREET ADDRESS	1161 HILLSBORO MILE	
CITY-ST-ZIP	HILLSBORO BCH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	GROB, EMIL C.	
1.3 STREET ADDRESS	1161 HILLSBORO MILE	
1.4 CITY-ST-ZIP	HILLSBORO BEACH, FL	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Emil Grob, Treasurer* **2-25-98** **954-411-9599**

CR2E037 (10/97)



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HILLSBORO COLONNADE, INC
1998 ANNUAL REPORT

FEI No 59-1167815

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2 LIST OF DIRECTORS CONT'D
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5 D
6 12 VENTURA, PETER
7 1161 HILLSBORO MILE
8 HILLSBORO BEACH, FL
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11 WAS ALSO A DIRECTOR LAST YEAR
12 AND INCLUDED ON 1997 REPORT
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	Initials	Date
Prepared By		
Approved By		