


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91020 045 ****61.25

DOCUMENT # 708146
 1. Entity Name
HILLSBORO COLONNADE, INC.



Principal Place of Business
~~3300 UNIVERSITY DR. #405~~
~~POMPANO BEACH, FL 33065~~

Mailing Address
 C/O WATSON PROPERTY MANAGEMENT
~~PO BOX 880328~~
~~POMPANO BEACH, FL 33065~~

94081675



2. Principal Place of Business
1161 Hillsboro Mile

3. Mailing Address
C/O USA SERVICES
6915 TAFT STREET

04272004 Chg-NP CR2E037 (10/03)

City & State
HILLSBORO BEACH, FL

City & State
HOLLYWOOD, FL

Zip
33062

Country
USA

Zip
33024

Country
USA

4. FEI Number
59-1167815

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
ROBERT KAYE & ASSOCIATES, P.A.
6261 NW 6 WAY, #103
FT. LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 *Donna M. Henning* DATE **4/29/04**

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

Filing Fee is \$61.25
Due by May 1, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SWASEY, BILL 1161 HILLSBORO MILE POMPANO BEACH, FL 33062	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VENTURA, PETER SR 1161 HILLSBORO MILE POMPANO BEACH, FL 33062	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PHILLIPS, PAUL 1161 HILLSBORO MILE POMPANO BEACH, FL 33062	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VENTURA, PETER A 1161 OCEAN BLVD POMPANO BEACH, FL 33062	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHILIPS, MELODIE 1161 HILLSBORO MILE POMPANO BEACH, FL 33062	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FUTCH, BARBARA 1161 HILLSBORO MILE POMPANO BEACH, FL 330621	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECDY TREAS SCOTT WILLIAMS 1161 HILLSBORO MILE HILLSBORO Bch, FL 33062	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STEVEN CHASE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DONNA HENNING	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PETER FELLEGGY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHARLES GIANNELLI	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JERRY DIMASO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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: *Donna M. Henning* DATE: **4/29/04** DAYTIME PHONE #: **954-570-6962**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR