## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State · DIVISION OF CORPORATIONS

DOCUMENT #

(0)

## HOLLYWOOD PLAYHOUSE, INCORPORATED

Principal Place of Business	Mailing Address
2640 WASHINGTON STREET	2640 WASHINGTON STREET
HOLLYWOOD FL 33020	HOLLYWOOD FL 33020-5711

## **FILED** Jan 30 1997 8:00am Secretary of State



Dringing Diagnat Business Mailing Address						
Principal Place of Business Mailing Address						
2640 WASHINGTON STREET 2640 WASHINGTON STREET						
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-5711						
!				3. Date Incorporated or Qualified	3a. Date of Last Report	
				02/22/1967	01/24/1996	
	2. Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For		
21 26			59-1091904	Not Applicable		
Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional		
22 27			C. Commons of states about a	Fee Required		
City & State City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be		
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for in		
24	<u> </u>	29 3	0		Yes 🗷 No	
ļ	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Reg	listered Agent	
			81 Name	DONALD R WALT	ERS	
ILOVITO	H & MANELLA		82 Street	Address (P.O. Box Number is Not Acceptable		
2206 HG	OLLYWOOD BLVD.			2189- SE 9 ST		
HOLLYV	VOOD FL 33020		83	SD \ OI		
			84 City	ompano Och +1	les Zio Codo	
			84 City		FL 85 Zip Code >	
11. Pursuant	to the provisions of Sections 617.050	2 agus 7.1508, Florida Statutes	, the above-named	corporation submits this statement for the population's board of directors. I hereby accep		
office or t	registered agont, or both, in the State am familia, with and agont the office	orida. Such change was auf	thorized by the corp da Statutes	poration's board of directors. I hereby accep	t the appointment as registered	
·	KUMMIN MIN	2 13 OF SECTION OF LOSGO, FIGURE	da diatatos.	1/	20/97	
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOT): F	Registered Agent signature	required when reinstating)	DATE	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	P	<b>▼</b> DELETE	1.1 TITLE	WALTERS, DONALD	PRES. M Change	
NAME	MIGNONE, TED		1.2 NAME		30 SW46 AVE #305	
STREET ADDRESS	1245 VAN BUREN ST		1.3 STREET ADDRESS	, <del></del>		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY - ST - ZIP	POMPANO Boh fl	33069	
TITLE	₩ P	DELETE	2.1 TrTLE	-Y.F.	Change Addition	
NAME	WALTERS, DONALD		2.2 NAME	SEFFREY OSTROW		
STREET ADDRESS	670 NE 8 COURT		2.3 STREET ADDRESS	3260 - SW445r		
CITY-ST-ZIP	POMPANO BEACH FL		2. 4 CiTY-ST-ZiP	JEFFREY OSTROW 3260 - SWY4ST FT. LAUDERDALE FIS	3312	
TITLE	T	DELETE	3 1 TITLE	71, 4100013,00, 110	Change Addition	
NAME	FRANK, ABBY		3 2 NAME			
STREET ADDRESS	2200 PARK LANE		33 STREET ADDRESS			
	HOLLYWOOD FL					
CITY-ST-ZIP TITLE	D	DELETE	34. CITY-ST-ZIP		Change Addition	
NAME	GREENFIELD, HOWARD	Otter	4 2 NAME		Shorter hadillon	
1	5920 SW 36 TERRACE				ļ	
STREET ADDRESS	FT LAUDERDALE FL		43 STREFT ADDRESS			
CiTY-ST-ZIP	T LAUDENDALE FL	<b>⊠</b> DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Autor	Change Addition	
TITLE	TOTAL TIAINE	Autun		Patti GARDNER WATCH 2502 EAGLE WATCH WESTON Fl 3302	La Change (El Audition	
NAME	TRELL, ELAINE.		5.2 NAME	Patte of SACING (LATCH	H LANC	
STREET ADDRESS	2640 WASHINGTON STREET		5.3 STREET ADDRESS	2002	7	
CITY-ST-ZIP	HOLLYWOOD FL	T Street	5.4 CITY - ST - ZIP	MEDION FI 330 F		
TITLE	MD	☐ DELETE	6.1 TITLE		Change Addition	
NAME	MAVRIDES, MARIANNE		6.2 NAME			
STREET ADDRESS	2640 WASHINGTON STREET		6.3 STREET ADDRESS			
CiTY-ST-ZIP	HOLLYWOOD FL		6.4 CITY - ST - ZIP			
4.4 Lala bara	منا مرمرين فيسونا فيستوها فالمناع وسياعي الأفرون فيريا	بكالمنيم فمحرم ممام بمصادلة ماياته يتفتين است	day the everyonian o	stated in Section 110.07/3ViV Florida Statutor	t fattualban manalifet albat alta	

nereby cermy mat the information supplied with this hing does not quality 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.

1/9/02

1-954-922-0406