2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# 713828

Entity Name: HILLSBORO SHORES IMPROVEMENT ASSOCIATION INCORPORATED

Current Principal Place of Business:

625 NE 3RD AVE
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

2203 BAY DR
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 59-2005107 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHORR, STEPHEN A ESQ.
625 NE 3RD AVE
FT. LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

SCHLEGEL, PAUL J ESQ.
2203 BAY DRIVE
FT. LAUDERDALE, FL 33062 US

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: PAUL J. SCHLEGEL 01/06/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SCHLEGEL, PAUL
Address: 2203 BAY DR
City-St-Zip: POMPANO BEACH, FL 33062

Title: DV ( ) Delete
Name: SCHORR, STEVEN
Address: 3416 DOVER RD
City-St-Zip: POMPANO BCH., FL 33062

Title: DV ( ) Delete
Name: GLAFF, JACKIE
Address: 3420 DOVER RD.
City-St-Zip: POMPANO BCH., FL 33062

Title: SD ( ) Delete
Name: CLINCE, MARY
Address: 2509 N RIVERSIDE DR
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete
Name: SIMROSS, LYNN
Address: 3406 ROBBINS RD.
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete
Name: RAPPA, HUGH G
Address: 3206 ROBBINS RD
City-St-Zip: POMPANO BEACH, FL 33062

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:

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: PAUL SCHLEGEL DP 01/06/2009
Electronic Signature of Signing Officer or Director Date