

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720345

FILED
Feb 04, 2011
Secretary of State

Entity Name: HOVIANNA APARTMENTS, INC.

Current Principal Place of Business:

401 NORTH J ST.
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

401 NORTH J STREET
APT 4
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: 59-1511134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PENICK, SHARON A
401 NORTH J STREET
#4
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

YATES, SHARON P
401 NORTH J STREET
#4
LAKE WORTH, FL 33460 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: SHARON P. YATES

02/04/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: ISAAC, MCFADDEN
Address: 401 NORTH J STREET APT 6
City-St-Zip: LAKE WORTH, FL 33460

Title: S
Name: YATES, NICHOLAS
Address: 401 NORTH J ST APT 4
City-St-Zip: LAKE WORTH, FL 33460

Title: VPD
Name: DE LA ROSA, MARTIN
Address: 401 NORTH J STREET APT 9
City-St-Zip: LAKE WORTH, FL 33460

Title: D
Name: GOLDENBERG, TYLER
Address: 401 NORTH J STREET #1
City-St-Zip: LAKE WORTH, FL 33460

Title: T
Name: YATES, SHARON P
Address: 401 NORTH J STREET APT 4
City-St-Zip: LAKE WORTH, FL 33460

Title: D
Name: JIMO, MARK
Address: 401 N. ST. APT. # 5
City-St-Zip: LAKE WORTH, FL 33460

I hereby 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 all other like empowered.

SIGNATURE: SHARON P. YATES

T

02/04/2011

Electronic Signature of Signing Officer or Director

Date