2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 18, 2005 8:00 am Secretary of State **DOCUMENT # 727616** 1. Entity Name 04-18-2005 90274 008 ****61.25 HOLIDAY SPRINGS VILLAGE CONDOMINIUM, INC. NO. Mailing Address Principal Place of Business 3261 HOLIDAY SPR. BLVD. MARGATE FL 33063 3131 HOLIDAY SPRINGS BLVD MARGATE FL 33063 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 59-1537315 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired \Box Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NORDHOLZ, JOAN A 3251 HOLIDAY SPRINGS BLVD # 108 MARGATE FL 33063 33063 MARGATE 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. FILE NOW FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Florida Department of State Due By May 1, 2005 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. ☐ Addition TITLE Change ■ Delete TITLE NORDHOLZ, JOAN NAME NAME 3251 HOLIDAY SPRINGS BLVD STREET ADDRESS STREET ADDRESS MARGATE FL 33063 CITY-ST-ZIP CITY-ST-ZIP **∑** Del ete Change Addition GLORIA HAISTER FRIEDMAN, JUDITH NAME NAME 3261 HOLIDAY SPRINGS BUD 3251 HOLIDAY SPGS BLVD STREET ADDRESS STREET ADDRESS MARGATE FL MARCATE, FL 33063 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition Delete TITLE PÛCCI, PHYLLIS NAME NAME 3251 HOLIDAY SPGS BLVD STREET ADDRESS STREET ADDRESS MARGATE FL 33063 CITY-ST-7IP CITY-ST-ZIP Addition ☐ Change Delete HILE FELTMAN, GERT IDA MURRA 3251 HOLIDAY SPRINGS BLVD NAME NAME 3261 HOLIDAY SPRINGS BLVD # STREET ADDRESS STREET ADDRESS MARGATE FL 33063 MARCATE FL 33063 CITY-ST-71P CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE LOCK, PHIL NAME NAME 3261 HOLIDAY SPRINGS BLVD STREET ADDRESS STREET ADDRESS MARGATE FL 33063 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition Defete THEF NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 attackment with an address, with all other like empowered.

FILED

Daytime Phone #