2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008
Secretary of State

DOCUMENT# 737503

Entity Name: HOLLYWOOD ESTATES HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

3300 N. STATE ROAD 7
F494
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

3300 N. STATE ROAD 7
F494
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BYRNE, MARY JO
HOLLYWOOD ESTATES HOMEOWNERS ASSOCIATION I
3300 N. STATE ROAD 7, BOX 494
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: GIANNETTINO, B ARBARA
Address: 3300 N. STATE ROAD 7, B187
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: T ( ) Delete
Name: BYRNE, MARY JO
Address: 3300 N STATE RD 7 BOX F494
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: S ( ) Delete
Name: MARANO, LOIS
Address: 3300 N STATE RD 7 BOX C276
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VP ( ) Delete
Name: MARINO, GLADLYS
Address: 3300 N STATE ROAD 7 BOX B193
City-St-Zip: HOLLYWOOD, FL 33021 US

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:

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: MARY JO BYRNE TREA 04/17/2008
Electronic Signature of Signing Officer or Director — Date