

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738455

FILED
Jan 04, 2010
Secretary of State

Entity Name: HOLIDAY SPRINGS VILLAGE RECREATION CORPORATION, INC.

Current Principal Place of Business:

3131 HOLIDAY SPRINGS BLVD.
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

3131 HOLIDAY SPRINGS BLVD.
MARGATE, FL 33063

New Mailing Address:

FEI Number: 59-1729972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAMA, LAWRENCE
3130 HOLIDAY SPRINGS BLVD
MARGATE, FL 33063 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: D
Name: BLOOMER, MAUREEN
Address: 3011 HOLIDAY SPRINGS BLVD
City-St-Zip: MARGATE, FL 33063

Title: S
Name: GOFFMAN, HERMAN
Address: 3200 HOLIDAY SPRINGS BLVD
City-St-Zip: MARGATE, FL 33063

Title: T
Name: LEVINE, MAURICE
Address: 3140 HOLIDAY SPRGS BLVD
City-St-Zip: MARGATE, FL 33063

Title: V
Name: KAUFMAN, WILLIAM
Address: 3110 HOLIDAY SPRINGS BLVD.
City-St-Zip: MARGATE, FL 33063

Title: P
Name: FAMA, LAWRENCE
Address: 3130 HOLIDAY SPRINGS BLVD
City-St-Zip: MARGATE, FL 33063

Title: D
Name: FOKKEN, WILLIAM
Address: 3160 HOLIDAY SPRINGS BLVD
City-St-Zip: MARGATE, FL 33063

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: LAWRENCE FAMA

P

01/04/2010

Electronic Signature of Signing Officer or Director

Date