2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749772

FILED Mar 17, 2006 Secretary of State

Entity Name: THE HOLLYWOOD ART GUILD, INC.

Current Principal Place of Business: New Principal Place of Business:

HOLLYWOOD ART & CULTURE CENTER HOLLYWOOD BEACH COMMUNITY CENTER

1301 S. OCEAN DR. 1301 S. OCEAN DR.

HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33020 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1984

HOLLYWOOD, FL 33020 US

FEI Number: 65-0582716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DRAVING, MARY E 6325 GARFIELD ST

HOLLYWOOD, FL 33024 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: DRAVING, MARY E Name: LEVY, SANDI

Address: 6325 GARFIELD ST Address: 20515 E. COUNTRY CLUB DRIVE # 1647

City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: AVENTURA, FL 33180

Title: SD () Delete Title: () Change () Addition

 Name:
 SANDS, RENEE
 Name:

 Address:
 200 LESLIE DR, #503
 Address:

 City-St-Zip:
 HALLANDALE, FL 33009
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 TILLOTSON, MARY
 Name:

 Address:
 2110 N 41ST AVE
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:

 $\label{eq:title:DVP} \textit{Title:} \qquad \textit{DVP} \qquad \textit{() Delete} \qquad \qquad \textit{Title:} \qquad \textit{DVP} \qquad \textit{(X) Change () Addition}$

 Name:
 LEVY, SANDI
 Name:
 DRAVING, MARY E

 Address:
 20515 E COUNTRY CLUB DRIVE #1647
 Address:
 6325 GARFIELD STREET

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:
 HOLLYWOOD, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the 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 E. DRAVING DVP 03/17/2006