2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT **DOCUMENT #749772** 1. Entity Name THE HOLLYWOOD ART GUILD, INC. Principal Place of Business Mailing Address HOLLYWOOD BEACH COMMUNITY CENTER P.O. BOX 1984 1301 S. OCEAN DR. HOLLYWOOD, FL 33020 US HOLLYWOOD, FL 33020 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent

FILED Feb 22, 2008 8:00 am **Secretary of State**

02-22-2008 90020 022 ****70.00



02132008 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0582716

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DRAVING, MARY E 6325 GARELELD ST HOLLYWOOD, FL 33024 TILLOTSON, MARY 2110 N. 41 AUE HOLLYWOOD, F1.33021

DO NOT WRITE IN THIS SPACE

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|--|--|--|--|--------------------------------|---------|-------|--|
| SIGNATURE. | Signature, typed or printed name of registered agent and trile | stered Agent signature | Agent signature required when reinstating) | | DATE | | |
| | Filing Fee is \$61.25 Due by May 1, 2008 | Election Campaign Fi Trust Fund Contributi | | \$5.00 May Be Added to Fees | | | |
| 10. | OFFICERS AND DIRECTORS | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD LEVY, SANDI 20515 E. COUNTRY CLUB DRIVE # AVENTURA, FL 33180 | 1647 | | : | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVP SANDS, RENEE 200 LESLIE DR, #503 HALLANDALE, FL 33009 | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD TILLOTSON, MARY 2110 N 41ST AVE HOLLYWOOD, FL 33021 | | | DO | NOT W | /RITE | A CONTRACTOR CONTRACTO |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD DRAVING, MARY E 6325 GARFIELD STREET HOLLYWOOD, FL 33024 | | | IN ' | THIS SI | PACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | , | | | * 3 ° m |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | | | | |

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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