

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757985

FILED
Jan 04, 2008
Secretary of State

Entity Name: HOLLYWOOD BEACH TOWER ASSOCIATION, INC.

Current Principal Place of Business:

301 HARRISON STREET
HOLLYWOOD, FL 330191721

New Principal Place of Business:

Current Mailing Address:

301 HARRISON STREET
HOLLYWOOD, FL 330191721

New Mailing Address:

FEI Number: 59-2314286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOCHERTY, PATRICIA
S P N RESORTS
301 HARRISON ST
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

DOCHERTY, PATRICIA
S P M RESORTS
301 HARRISON ST
HOLLYWOOD, FL 33019 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:

01/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: OTTINO, J.P., III,
Address: 3015 N OCEAN BLVD STE 115
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: TD () Delete
Name: GRAY, LEO R
Address: 4658 SW 45TH TERR
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: PD () Delete
Name: AMZAND, EDWARD
Address: 240 N 65TH WAY
City-St-Zip: HOLLYWOOD, FL 33024

Title: VD () Delete
Name: AVERY, RALPH
Address: 7601 N FEDERAL HWY STE 125
City-St-Zip: BOCA RATON, FL 33487

Title: SD () Delete
Name: MAHNKEN, THELMA
Address: 6447 FRANKLIN ST
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: AMZAND, EDWARD
Address: 301 HARRISON STREET
City-St-Zip: HOLLYWOOD, FL 33019

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: EDWARD AMZAND

PD

01/04/2008

Electronic Signature of Signing Officer or Director

Date