

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 09, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 761927**  
 1. Entity Name  
 NEPTUNE HOLLYWOOD BEACH CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 2012 N. SURF ROAD, HOLLYWOOD, FL 33019  
 Mailing Address: 2012 N. SURF ROAD, HOLLYWOOD, FL 33019



02042005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number: 59-2256165  
 Applied For: Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 POLIAKOFF, GARY  
 BECKER, POLIAKOFF, & STREITFELD  
 3111 STIRLING RD.  
 FT. LAUDERDALE, FL 33310

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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 the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent's signature required when reinstating) DATE: \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	ST
NAME	SPARROW, JACQUELINE
STREET ADDRESS	7191 SHALIMAR ST
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	D
NAME	THOMPSON, STEPHEN
STREET ADDRESS	21471 NW 40 CIR CT
CITY-ST-ZIP	OPA LOCKA, FL 33055
TITLE	P
NAME	SAMPSON, BARBARA
STREET ADDRESS	7630 KISMET STREET
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	D
NAME	MILLER, DONALD,
STREET ADDRESS	1601 SW 88TH AVE.
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	D
NAME	JOYNT, JOSEPH
STREET ADDRESS	309 CAROLINA ST.
CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	D
NAME	JOYNT, AUDREY
STREET ADDRESS	309 CAROLINA ST
CITY-ST-ZIP	HOLLYWOOD, FL 33019

U00000222662  
 02/10/05-80010-014 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jacqueline Sparrow Sec/Treas  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date: 2/5/05  
 Debit Phone #