


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 08:00 AM
Secretary of State

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



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

DO NOT WRITE IN THIS SPACE



03172007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2256165	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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 signature required when reinstating) DATE: _____

Filing Fee is \$61.25
Due by May 1, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	SPARROW, JACQUELINE
STREET ADDRESS	7191 SHALIMAR ST
CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	PD
NAME	SAMPSON, BARBARA
STREET ADDRESS	7630 KISMUT ST
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
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000680295
 04/03/07-80071-020 61.25

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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jacqueline Sparrow* 3/27/07 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #