


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 30, 2006 08:00 AM
Secretary of State

DOCUMENT # 768616 1. Entity Name HID PLAZA ASSOCIATION, INC.	
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Principal Place of Business 23257 STATE RD. 7 BOCA RATON, FL 33426 US	Mailing Address C/O CAROL GOLDEN 7458 CAMPO FLORIDO BOCA RATON, FL 33433 US
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03262006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0116484	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GLANTZ, RONALD E 7951 SW 6TH ST. #110 PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 Carol Golden DATE 3/29/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GOLDEN, RICHARD 7458 CAMPO FLORIDO BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO GOLDEN, CAROL 7458 CAMPO FLORIDO BOCA RATON, FL 33433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST STEINBERG, JOE 2655 NORTH OCEAN DRIVE, SUITE 300 SINGER ISLAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1-888-688-6885
04/12/06 60061-003 61.25

**DO NOT WRITE
IN THIS SPACE**

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: Carol Golden x 3/29/06 x 541-883-55:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #