2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N02000002457

1. Entity Name
COURTYARD VILLAS OF HARRISON STREET HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1617 HARRISON ST HOLLYWOOD, FL 33020	1617 HARRISON ST HOLLYWOOD, FL 33020

DO NOT WRITE IN THIS SPACE

01042008 No Chg-NP CR2E037 (4/06)

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HULSE, EOSEL B JR
1617 HARRISON ST
HOLLYWOOD, FL 33020

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7. 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 _____ DATE
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, 2008

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

U00000937743
05/27/08-80061-024 61.25

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SPEIRS, EDWARD W
STREET ADDRESS	1619 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	T
NAME	DAILY, NADER
STREET ADDRESS	1615 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	S
NAME	HULSE, EDSEL B
STREET ADDRESS	1617 HARRISON ST
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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: Nader Daily 04/28/08 305-302-2957
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #