2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007225

FILED Apr 28, 2006 Secretary of State

Entity Name: HOLLYWOOD NORTH BEACH ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4514 N. OCEAN DRIVE HOLLYWOOD, FL 33019 **Current Mailing Address: New Mailing Address:** 4514 N. OCEAN DRIVE HOLLYWOOD, FL 33019 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRANPA, CAROL 5505 N SÚRF ROAD 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition PASSALACQUA, JOHN Name: Name: 4514 N. OCEAN DR. Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: () Delete Title: () Change () Addition GRAMPA, CAROL Name: Name: Address: 5505 NORTH SURF ROAD Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: () Delete Title: () Change () Addition MOORE, CHRISTOPHER J Name: Name: Address: 343 PALM, UNIT 7 Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: VD () Delete Title: () Change () Addition SCHREIER, WAYNE Name: Name: 3200 S UNIVERSITY DRIVE Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33328 City-St-Zip: Title: () Delete Title: () Change () Addition SCHECTER, LAURIE Name: Name: 4500 N SURF ROAD Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURIE SCHECTER DIR 04/28/2006