


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 23, 2008 8:00 am**  
**Secretary of State**

04-23-2008 90040 012 \*\*\*\*61.25

DOCUMENT # N05000004022							
1. Entity Name GREATER HOLLYWOOD ARTS FOUNDATION, INC.							
Principal Place of Business 330 NORTH FEDERAL HWY HOLLYWOOD, FL 33020		Mailing Address PO BOX 220810 HOLLYWOOD, FL 33022					
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country	4. FEI Number <b>36-4572716</b>			
5. Certificate of Status Desired <input type="checkbox"/>				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
A1A REGISTERED AGENT INC. 5647 110TH AVE. NORTH ROYAL PALM BEACH, FL 33411-0000			Name				
			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL	Zip Code
			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 _____							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees			
<b>Make check payable to Florida Department of State</b>							
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	C	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	MORRISON, SAMUEL F		NAME	<i>See attached roster</i>			
STREET ADDRESS	1317 NE 2ND STREET		STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301		CITY-ST-ZIP				
TITLE	VC	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	GALLO, JULIO F		NAME				
STREET ADDRESS	1441 BRICKELL AVENUE 3RD FLOOR		STREET ADDRESS				
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP				
TITLE	ST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	BEST, SUSAN		NAME				
STREET ADDRESS	1120 TYLER STREET		STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD, FL 33019		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	KOSLOW, ALAN		NAME				
STREET ADDRESS	3111 STIRLING ROAD		STREET ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE, FL 33312		CITY-ST-ZIP				
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	SHULMAY, STEVEN E		NAME				
STREET ADDRESS	330 NORTH FEDERAL HWY		STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD, FL 33020		CITY-ST-ZIP				
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	MILLER, CYNTHIA B		NAME				
STREET ADDRESS	1740 SOUTH YOUNG CIR		STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD, FL 33020		CITY-ST-ZIP				
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: <i>Steven E. Shulman</i>		Steven E. Shulman		4/17/2008 (954) 921-3520			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							

Greater Hollywood Arts Foundation, Inc.  
Board of Directors  
April 17, 2008

ATTACHMENT

40078589

HWS000004022

*Chairperson*

Susan E. Best  
1120 Tyler Street  
Hollywood, FL 33019

*Vice Chairperson*

Cynthia B. Miller  
NewStar Realty, Inc.  
1740 South Young Circle  
Hollywood, FL 33020

*Secretary*

Sally Robbins  
4023 Buchanan Street  
Hollywood, FL 33021

*Treasurer*

Alan B. Koslow,  
Becker & Poliakoff, P.A.  
3111 Stirling Road  
Fort Lauderdale, FL 33312-6525

*Director*

Margi Nothard  
Glavovic Studio, Inc.  
724 NE 3rd Avenue  
Fort Lauderdale, FL 33304

*Director*

Samuel F. Morrison  
2140 N.W. 4th Street  
Fort Lauderdale, Florida 33311

*Director*

Dr. Julio F. Gallo  
The Miami Institute for Age Management  
and Intervention  
1441 Brickell Avenue  
3rd Floor-Sky Lobby  
Miami, FL 33131

*Director*

The Honorable Joseph A. Gibbons  
Representative, District 105  
State of Florida  
Pembroke Town Hall District Office  
3150 SW 52<sup>nd</sup> Avenue, Suite 203  
Pembroke Park, FL 33023-5413

*Director*

Estelle Loewenstein  
319 Palm Street  
Hollywood, FL 33019

*Director*

Debbie Orshefsky  
Greenberg Traurig  
401 East Las Olas Boulevard  
Suite 2000  
Fort Lauderdale, FL 33301

*President*

Steven E. Shulman  
Greater Hollywood Arts Foundation, Inc.  
330 North Federal Highway  
Hollywood, FL 33020