

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007862

FILED
Apr 28, 2006
Secretary of State

Entity Name: HOLLYWOOD ACADEMY OF ARTS & SCIENCE PTO, INC.

Current Principal Place of Business:

1720 HARRISON ST
HOLLYWOOD, FL 33020

New Principal Place of Business:

1720 HARRISON ST SUITE 1A
HOLLYWOOD, FL 33020

Current Mailing Address:

1720 HARRISON ST
HOLLYWOOD, FL 33020

New Mailing Address:

1720 HARRISON ST SUITE 1A
HOLLYWOOD, FL 33020

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARMER, DANIEL
JACKSON BLOCK TAX CENTER
1935 PEMBROKE RD
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

FARMER, DANIEL
JACKSON BLOCK TAX CENTER
968 W HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 33009 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:

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NICOLETTE, LUZ
Address: 6532 MAYO ST
City-St-Zip: HOLLYWOOD, FL 33023

Title: 1-VP () Delete
Name: LOADER, MICHELE
Address: 1531 MOFFETT ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: 2-VP () Delete
Name: HENRIQUEZ, ANNA
Address: 1535 MOFFETT ST
City-St-Zip: HOLLYWOOD, FL 33020

Title: T () Delete
Name: BOGRAKOS, THERESA
Address: 1538 SHENANDOAH ST
City-St-Zip: HOLLYWOOD, FL 330202571

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PALMER, LARISA
Address: 4974 SW 24TH AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: S (X) Change () Addition
Name: SCHIFF, CHRISTINE
Address: 1175 HAYES ST
City-St-Zip: HOLLYWOOD, FL 33019

Title: T (X) Change () Addition
Name: HILTON, JENNIFER
Address: 3325 HARDING ST
City-St-Zip: HOLLYWOOD, FL 33021

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: LUZ NICOLETTE

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date