

FILE NOW: FILING FEE IS \$61.25

FILED

May 19 1997 8:00am
Secretary of State

*NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N15708** (3)

1. Corporation Name

THE HOLLYWOOD BEACH RESORT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
101 N OCEAN DR #8 HOLLYWOOD FL 33019 US	101 N. OCEAN DRIVE #8 HOLLYWOOD FL 33019-1728 US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/03/1986		3a. Date of Last Report 03/06/1996	
21		26		4. FEI Number 59-2700531		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip		29 Zip		30 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DAILY MANAGEMENT, INC. 101 N OCEAN DR #8 HOLLYWOOD FL 33019				81 Name DAILY MANAGEMENT, INC.			
				82 Street Address (P.O. Box Number is Not Acceptable) 401 RACQUET CLUB ROAD			
				83			
				84 City FT. LAUDERDALE FL 85 Zip Code 33326			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]*
Signature of individual or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 4-16-97

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SHURE, MICHAEL			1.2 NAME			
STREET ADDRESS	101 NORTH OCEAN DR.			1.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			1.4 CITY-ST-ZIP			
TITLE	VD	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GOODALL, BRENDA			2.2 NAME			
STREET ADDRESS	101 N OCEAN DR			2.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			2.4 CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	GILBERT, PAT			3.2 NAME			
STREET ADDRESS	845 N. RAINBOW DRIVE			3.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			3.4 CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SCHECHER, RICHARD			4.2 NAME			
STREET ADDRESS	499 MARLBORO RD			4.3 STREET ADDRESS			
CITY-ST-ZIP	OLD BRIDGE NJ 08857			4.4 CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BAUMAN, DAVID			5.2 NAME			
STREET ADDRESS	101 N OCEAN DR			5.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	KESSLER, THOMAS			6.2 NAME			
STREET ADDRESS	101 N OCEAN DR			6.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0023508

CR2E037 (9/96)



**Hollywood Beach Resort
Condominium Association Inc.**



101 N. Ocean Drive, #8 • Hollywood, Florida 33019
(954) 921-7085 • Fax (954) 921-8758

ADDENDUM TO: NONPROFIT CORPORATION ANNUAL REPORT 1997

DOCUMENT # : N15708 (3)

CORPORATE NAME: HOLLYWOOD BEACH RESORT CONDOMINIUM ASSOCIATION, INC.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

7.1 TITLE	D
7.2 NAME	JERRY THOMPSON
7.3 STREET ADDRESS	101 N. OCEAN DR.
7.4 CITY-ST-ZIP	HOLLYWOOD, FL 33019