## 2008 NON PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 27, 2008 8:00 am Secretary of State

DOCUMENT # N16000007860  1. Entity Name HOLLYWOOD INDUSTRIAL PARK ASSOCIATION, INC.						02-27-2008	90012 005 ***	150.00
Principal Place of Business Mailing Address					1 .			
125 N 46 A\ HOLLYWOOD		125 N 46 AVE HOLLYWOOD, FL 33021						
	•						1      1   1   1   1   1   1   1   1	
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01042008	Chg-P	CR2E034 (12/0	<u> </u>	
City & State		City & State		4. FE! Number 20-25680	014	<del></del>	Applied For Not Applicable	
Zip Country		Zip	Zip Country		5. Certificate of	Status Desired	□ \$8.75 A Fee Requ	
-	6. Name and Address of Curre	nt Registered Agent	· · · · · · · · · · · · · · · · · · ·	1	7. Name and A	ddress of New R	egistered Agent	
GOTTIER	KENNETH			Name				
GOTTIEB, KENNETH 125 N 46 AVE HOLLYWOOD, FL 33021			Street Address (P.O. Box Number is Not Acceptable)					
				City			FL Zip C	ode
	e named entity submits this statement tions of registered agent.	for the purpose of changing its	s register	ed office or registe	red agent, or both,	in the State of Flo	orida. Tam familiar wi	h, and accept
SIGNATURE  Signature, typekt or printed name or registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550			ncing \$5	i.00 May Be ded to Fees			The state of the s
After M	ay 1, 2008 Fee will be \$550 OFFICERS AN	D.00 Trust Fund Con	tribution.	Add		HANGES TO OFF	ICERS AND DIRECTO	
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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 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an accuracy, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR DIRECTOR

2/4/08

(954) 966-7900