

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Dec 20, 2011  
Secretary of State**

DOCUMENT# N23772

**Entity Name:** HOLLY LAKE ASSOCIATION, INC.**Current Principal Place of Business:**21740 N. 7TH STREET  
PEMBROKE PINES, FL 33029**New Principal Place of Business:****Current Mailing Address:**C/O BENCHMARK PROP. MGMT. , INC.  
7932 WILES ROAD  
CORAL SPRINGS, FL 33067**New Mailing Address:****FEI Number:** 65-0102040**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**KAYE & BENDER  
1200 PARK CENTRAL BLVD. SOUTH  
POMPANO BEACH, FL 33064 US**Name and Address of New Registered Agent:**

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:****Title:** P  
**Name:** BATTEN, ED  
**Address:** 241 NW 218 TERRACE  
**City-St-Zip:** PEMBROKE PINES, FL 33029**Title:** T  
**Name:** MORALES, PAUL  
**Address:** 21601 NW 3 PLACE  
**City-St-Zip:** PEMBROKE PINES, FL 33029**Title:** S  
**Name:** PARKER, KERRI  
**Address:** 240 NW 217 WAY  
**City-St-Zip:** PEMBROKE PINES, FL 33029**Title:** RS  
**Name:** RIVERA, LOUIS  
**Address:** 21731 NW 7 STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33029**Title:** D  
**Name:** COSTA, LUIS C  
**Address:** 21821 SO HERITAGE CIRCLE  
**City-St-Zip:** PEMBROKE PINES, FL 33029

I hereby 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 all other like empowered.

SIGNATURE: DEE SMITH

AD.D

12/20/2011

Electronic Signature of Signing Officer or Director

Date