


FILE NOW: FILING FEE IS \$61.25

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Apr 16, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N93000001161					
1. Corporation Name EMERALD HILLS HOMEOWNER'S ASSOCIATION OF HOLLYWOOD, INC.					
Principal Place of Business 125 NORTH 46TH AVENUE HOLLYWOOD FL 33021			Mailing Address 125 NORTH 46TH AVENUE HOLLYWOOD FL 33021		



2. Principal Place of Business 21 P.O. Box 7534 Suite, Apt. #, etc.		2a. Mailing Address 26 P.O. Box 7534 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 03/08/1993	
22 City & State Hollywood, FL		27 City & State Hollywood, FL		4. FEI Number 65-0405589	
23 Zip 33081		28 Zip 33081		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required.	
24 Country U.S.A.		29 Country U.S.A.		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent GOTTIEB, KENNETH A 125 NORTH 46TH AVENUE HOLLYWOOD FL 33021				10. Name and Address of New Registered Agent 81 Name KENNETH A. WOLIS 82 Street Address (P.O. Box Number is Not Acceptable) 4600 Sheridan St #205 83 84 City Hollywood FL 85 Zip Code 33021			
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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 KENNETH A. WOLIS DATE April 14, 1999

(NOTE: Registered Agent signature required when reinstating)

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 checked="" type="checkbox"/> Addition			
NAME	CHUCHLA, LENORA		1.2 NAME				
STREET ADDRESS	5131 N. 37TH ST.		1.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP	33021			
TITLE	VPD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	ZELLER, MARTIN		2.2 NAME				
STREET ADDRESS	3850 N. 40TH AVE.		2.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		2.4 CITY-ST-ZIP	33021			
TITLE	TD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	COHEN, ART		3.2 NAME	T D WOLIS, KENNETH			
STREET ADDRESS	5141 N. 37TH ST.		3.3 STREET ADDRESS	3620 N. 46 AVE			
CITY-ST-ZIP	HOLLYWOOD FL		3.4 CITY-ST-ZIP	Hollywood, FL			
TITLE	CSO	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	HAIMS, EDITH		4.2 NAME				
STREET ADDRESS	2808 N. 46 AVE. #E352		4.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 33021		4.4 CITY-ST-ZIP				
TITLE	RSD	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	LONDON, TRINA		5.2 NAME	R'S D			
STREET ADDRESS	4040 N. 43 AVE		5.3 STREET ADDRESS	BUSHIN, GLADYS			
CITY-ST-ZIP	HOLLYWOOD FL 33021		5.4 CITY-ST-ZIP	3800 N. HILLS DR APT. 314			
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP				

14. I 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, with all other like empowered.

SIGNATURE: KENNETH A. WOLIS DATE 3/20/99 DAYTIME PHONE # 954-963-2228

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037-111/98