


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 24, 2007 08:00 AM
Secretary of State**

DOCUMENT # N93000001360 1. Entity Name LEVY-IANNONE HOMEOWNER'S ASSOCIATION, INC.		
Principal Place of Business 337 MADISON ST HOLLYWOOD, FL 33019 US	Mailing Address 337 MADISON ST HOLLYWOOD, FL 33019 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent IANNONE, MERCEDES 337 MADISON ST HOLLYWOOD, FL 33019		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Mercedes Iannone</i></u> 7/1/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT IANNONE, MERCEDES 337 MADISON ST HOLLYWOOD, FL 33019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD IANNONE, MERCEDES 337 MADISON ST. HOLLYWOOD, FL 33019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WALKER, LENORE 339MADISON ST HOLLYWOOD, FL 33019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u><i>Mercedes Iannone</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		1-20-07 305-628-6693 <small>Date Daytime Phone #</small>



01202007 No Chg-NP

CR2E037 (4/06)

4. FEI Number
65-0458883

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

U00000600553
01/26/07-80014-007 70.00

**DO NOT WRITE
IN THIS SPACE**