2/17/97 B - 1986 N/c FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

FILED

Feb 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # N9500000059 (4) HOLLYWOOD THREE LAKES CIVIC ASSOCIATION, INC.					
Principal Place of Business Mailing Address					IKK BBIIK BBIK DBIIK BBIDI BIKIF IQIV IDBI
1223 VAN BURE HOLLYWOOD FI		1223 VAN BUREN ST HOLLYWOOD FL 33019-152	6		
				3. Date Incorporated or Qualified 12/23/1994	3a. Date of Last Report 08/02/1996
2. Principal Pla	Principal Place of Business 2a. Mailing Address 26			4. FEI Number 65-0545905	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
27			G. Carmeate of cialca beamed	Fee Required	
City & State	•	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zim	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip 24	25		30	8. This corporation has liability for in Florida Statutes	Yes No
[24]	9. Name and Address of Current		30	10. Name and Address of New Reg	
			81 Name		
TORTORA, GARY L			82 Street Add	Iress (P.O. Box Number is Not Acceptable	e)
1223 VAN BUREN ST					
HOLLYWOOD FL 33019			63		
	~		84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 611,0562 and 617.1508. Florida Statutes, the above-named office or registered agent, or both, in the state of Florida. Such change was authorized by the coragent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.				poration submits this statement for the pu	
office or re	egistered agent, or both, in the state of	4Florida, Such change was a jone of Section 617,0503. Florida.	authorized by the corpora orida Statutes.	ation's board of directors. I hereby accept	t the appointment as registered
SIGNATURE	May XX	1012 -		7/10/97	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent			Registered Agent signature requ		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 Change Addition
TITLE	P AND AND A	☐ DELETE	1.1 TITLE		Change C Addition
NAME	TORTORA, GARY L		1.2 NAME		
STREET ADDRESS	1223 VAN BUREN STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	HOLLYWOOD FL 33019	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	OPLINGER, ANNA	L DECEN	22 NAME		
STREET ADDRESS	1545 VAN BUREN ST		2.3 STREET ADDRESS	•	
CITY-ST-ZIP	HOLLYWOOD FL 33020		2 4 CITY-ST-ZIP		
TITLE	D	DELETE	31 TITLE		Change Addition
NAME	GROGER, GRACE		3.2 NAME		
STREET ADDRESS	1043 N. NORTH LAKE DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33019		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition
NAME	MARTINEZ, SUSAN		4. 2 NAME		
STREET ADDRESS	1643 LEE STREET		4.3 STREET ADDRESS	·	
CITY - ST - ZIP	HOLLYWOOD FL 33020	The professional and the profe	4.4 CITY - ST - ZIP		Change Addition
TITLE	D	☐ DELETE	5.1 TITLE		Change Addition
NAME	SOLARSH, IRVING		5.2 NAME		
STREET ADDRESS	1535 JOHNSON STREET HOLLYWOOD FL 33020		5.3 STREET ADDRESS		
C+TY-ST-ZIP TITLE	HULLTWOOD FL 33020	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
Since Appliess			0.0000000000000000000000000000000000000		

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 anguer 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 of 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, often an address.