FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

N95000000982 (7)

HOLLYWOOD EAST, INC.

FILED
May 27 1998 8:00am
Secretary of State

Principal Place of Business Mailing Ad		Mailing Address			
10350 MPERIA UNIT 20 LARGO FL 346	JL PT. DR. WEST	10350 IMPERIAL PT. DR. WES UNIT 20 LARGO FL 34644	\$T		3. Date Incorporated or Qualified 02/27/1995 4. FEI Number Applied For
2. Principal P	lace of Business	2a. Mailing Address			59-3300393 Not Applicable
21	ace of Ecompas	26			5. Certificate of Status Desired S8.75 Additional Fee Regulred
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be
22	- ,,	27			Trust Fund Contribution Added to Fees
City & Stat	0	City & State			7. Is this nonprofit corporation a homeowners association?
Zip	Country	28	Country	;	Yes X No 8. This corporation owes or has paid the current year Intangible
24	25	29 30	- 1 ′		Personal Property Tax due June 30. Yes \(\Delta\) No
	9. Name and Address of Currer				10. Name and Address of New Registered Agent
			81	Name	1
	S, CHRISTOPHER A. MP er ial pt. dr. West		82	Street A	Address (P.O. Box Number is Not Acceptable)
UNIT 20			83		
LARGO	FL 34644		84	City	85 Zip Code
11. Pursuant	to the provisions of Sections 617.050)2 and 617.1508, Florida Statutes	, the above	a-named	d corporation submits this statement for the purpose of changing its registered
office or r	egi ster ed agent, or both, in the State m f am iliar with, and accept the oblig	of Florida. Such change was autations of Section 617.0503. Florid	horized by da Statutes	the corp	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered ago			nt signatura	re required when reinslating) DATE
12.		D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D Change X Addition
TITLE	P/D Wayne, Gerald A.	L DECERE	1.1 TITLE 1.2 NAME	}	
NAME STREET ADDRESS	7880 54TH AVE. NO. #79		1.3 STREET	1000000	PETRO, LAURA
	ST. PETERSBURG FL 33709		1.4 CITY - S		1 JOOT TOYTH BIREDI NO.
CITY-ST-ZIP TITLE	V/D	A DELETE	2.1 TITLE	1-21	SEMINOLE, FL 33542 Change * Addition
NAME	JOHNSON, DALE W.		2.2 NAME		_ ·
STREET ADDRESS	392 LAKE VIEW TERR.	•	2.3 STREET	ADDRESS	PETRO, BETTY
CITY-ST-ZIP	PALM HARBOR FL 34483	l	2. 4 CITY-S	- 1	JOUL 135IN SIKEEL NU.
TITLE	S/D	A DELETE	3.1 TITLE	7 24	SEMINOLE, FL 33542 Change Addition
NAME	GOODSPEED, MIRIAM		3.2 NAME		
STREET ADDRESS	292 LAKE VIEW TERR.		3.3 STREET	ADDRESS	
CITY - ST - ZIP	PALM HARBOR FL 34483		3.4. CITY-S	ST-ZIP	
TITLE	T/ D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	PHILLIPS, CHRISTOPHER A.	l	4. 2 NAME		
STREET ADDRESS	10350 IMPERIAL PT. DR. WE	ST	4.3 STREET	ADDRESS	
CITY-ST-ZIP	LARGO FL 34644		4.4 CITY-S	T-ZIP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS		ļ	5.3 STREET	ADDRESS	
CITY-ST-ZIP			5.4 CITY-S	T- ZIP	
TITLE		☐ DEL€TE	6.1 TITLE	- 1	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADDRESS	

14. Thereby 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 approach.

Mune 14 1998 (813\596-5849)