

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007371

FILED
Jan 07, 2009
Secretary of State

Entity Name: HOLLYWOOD FIRST CHOICE, INC.

Current Principal Place of Business:

7350 NO. DAVIE RD. EXTENSION
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

7350 NO. DAVIE RD. EXTENSION
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 65-0913110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, TIM
7350 N DAVIE RD EXT
HOLLYWOOD, FL 33024 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: PD () Delete
Name: SCHLOSSBERG, MARTIN
Address: 7300 NO. DAVIE RD. EXTENSION
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: SHANDLER, MARC
Address: 7350 N DAVIE RD EXT
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: HARRIS, BETSY
Address: 7350 N DAVIE RD EXT
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: MCGOWAN, DEBA
Address: 7350 N. DAVIE RD EXT
City-St-Zip: HOLLYWOOD, FL

Title: T () Delete
Name: EDELSTEIN, LLOYD
Address: 7350 N DAVID RD EXT
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TIM SCHWARTZ

VP

01/07/2009

Electronic Signature of Signing Officer or Director

Date