FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000039218

HOLLAND OF DELRAY, INC.

rincipal Place of Business	Mailing Address
860 N.E. 12TH AVE.	4860 N.E. 12TH AVE.
T. LAUDERDALE FL 33334	FT. LAUDERDALE FL 33334

FILED Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90016 019 ***150.00



l		·		*		<u> </u>		. 	
Principal Plac	e of Business	Mailing Address							
4860 N.E. 12TH AVE. 4860 N.E. 12TH AVE.									
FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334			3334			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed	N THIS SPACE		
						05/16/1995			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				65-0587049		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		5 Additional	
22		27				5. Certificate of Status Desired	Fee	e Required	
City & Stat	e .	City & State				6. Election Campaign Financing	\$5.	00 May Be	
23		28				Trust Fund Contribution	Add	ed to Fees	
Zip	Country	Zip		untry		8. This corporation owes the current y		_	
24	25	29	30	1		Personal Property Tax.	☐Yes	□No	
,	9, Name and Address of Curren	nt Registered Agent		81	Mana	10. Name and Address of New Regis	stered Agent		
HOI	LAND, GERALD M	Ethylethauthau Euritha		01	Name		*	!	
	N.E. 12TH AVE	•		82 Street Address (P.O. Box Number is Not Acceptable)					
	AUDERDALE FL 33334			83			TARATA	्रक्ष अवद्यासम्बद्धाः स्टब्स् राष्ट्रका अवद्यासम्बद्धाः	
1						。 1. 10 10 10 10 10 10 10 10 10 10 10 10 10		等制制 相關	
,				84	City	a to k a second to be second	FI 85 2	Zip Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida St	stutes, the a	bove	-named corp	poration submits this statement for the purp	ose of changing	its registered	
l office or r	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change wa	is authorized	ועסני	tne corporati	on's board of directors. I hereby accept the	appointment a	s registered	
_	in familiar with, and accept the obligar	ilons of, Section 607.0505,	· Ionda Stat	utes.		,			
SIGNATURE	Signature, typed or printed name of registered agen	nt and title If applicable. (N	OTE: Registered	i Agent	t signature require	ed when reinstating)	ATE		
12.	OFFICERS AN	ID DIRECTORS	13.		•	ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN 12	
TITLE	PD	☐ DELETE	1,† 11	TLE			☐ Char	ige 🔲 Addition	
NAME	HOLLAND, GERALD M		1.2 N/	AME				1	
STREET ADDRESS	4860 N.E. 12TH AVE.		1.3 \$1	REET.	ADDRESS				
CITY-ST-ZIP.	FT. LAUDERDALE FL 33334		1.4 Ci	TY-ST	ZIP	•			
TITLE	VSD								
NAME :	HAHNER, RICHARD A	☐ DELETE	2.1 TJ	ILE			☐ Char	ige 🔂 Addition	
STREET ADDRESS		☐ DELE1E	2.1 TJ 2.2 NJ				☐ Char	ge Addition	
	4860 NE 12TH AVE	☐ DELETE	2.2 N/	AME	ADDRESS	· · · · · ·	☐ Char	nge Addition	
CITY-ST-ZIP	4860 NE 12TH AVE FT.LAUDERDALE FL		2.2 N/ 2.3 S1 2.4 C	AME		• • •	· .		
CITY-ST-ZIP TITLE		☐ DELETE	2.2 N/ 2.3 S1 2.4 C	AME TREET			☐ Char		
			2.2 N/ 2.3 ST 2.4 C	AME TREET CITY-ST TLE		·	· .		
TITLE 1973	FT.LAUDERDALE FL		2.2 N/ 2.3 S1 2.4 C 3.1 π 3.2 N/	AME TREET SITY-SI TLE AME			· .		
NAME STREET ADDRESS CITY-ST-ZIP		DELETE	2.2 N/ 2.3 S1 2.4 C 3.1 π 3.2 N/ 3.3 S1 3.4 C	AME TREET TLE AME TREET	T-ZIP ADDRESS		☐ Char	ge	
TITLE NAME STREET ADDRESS	FT.LAUDERDALE FL		2.2 N/ 2.3 ST 2.4 C 3.1 π 3.2 N/ 3.3 ST 3.4 C 4.1 TT	AME TREET, TLE AME TREET, TITY-ST	T-ZIP ADDRESS		☐ Char		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	FT.LAUDERDALE FL	DELETE	2.2 N/ 2.3 ST 2.4 C 3.1 Π 3.2 N/ 3.3 ST 3.4 C 4.1 Π 4.2 N/	AME TREET TLE AME TREET TTY-ST TLE AME	ADDRESS		☐ Char	ge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	FT.LAUDERDALE FL	☐ DELETE	2.2 N/ 2.3 ST 2.4 C 3.1 Π 3.2 N/ 3.3 ST 3.4 C 4.1 Π 4.2 N/	AME TREET TLE AME TREET TTY-ST TLE AME	T-ZIP ADDRESS		☐ Char	ge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	FT.LAUDERDALE FL	☐ DELETE	2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST	AME IREET ITLE AME ITY-ST ILE IAME ITY-ST ITY-ST	ADDRESS ADDRESS ADDRESS		Char	ge	
TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE	FT.LAUDERDALE FL	DELETE	2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT	AME TREET, TLE AME TREET, TLE IAME TREET, TLE TREET, TY-ST	ADDRESS ADDRESS ADDRESS		☐ Char	ge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	FT.LAUDERDALE FL	☐ DELETE	2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CI 5.1 TT 5.2 NV	AME TREET, TLE AME TREET, TTLE AME TREET, TTLE AME TREET, TTLE AME TREET, TTLE AME	T-ZIP ADDRESS T-ZIP ADDRESS -ZIP		Char	ge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	FT.LAUDERDALE FL	☐ DELETE	2.2 Nv 2.3 ST 2.4 C 3.1 TT 3.2 Nv 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CC 5.1 TT 5.2 Nv 5.3 ST	TREET, TILE AME TREET, TILE AME TREET, TILE T	ADDRESS 1-ZIP ADDRESS -ZIP ADDRESS		Char	ge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	FT.LAUDERDALE FL	☐ DELETE	2.2 NV 2.3 ST 2.4 C 3.1 TT 3.2 NV 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CF 5.1 TT 5.2 NV 5.3 ST	TREET, STEET IN THE STEET IN TH	ADDRESS 1-ZIP ADDRESS -ZIP ADDRESS		☐ Char	ge Addition ge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	FT.LAUDERDALE FL	☐ DELETE	2.2 Nv 2.3 ST 2. 4 C 3.1 TT 3.2 Nv 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 4.4 CG 5.1 TT 5.2 Nv 5.3 ST 5.4 CG	AME IREET ITLE AME IREET ILE AME IREET ILE AME IREET ILE AME IREET ITLE AME IREET ITLE AME IREET ITLE AME IREET ITLE IREET ITLE IREET ITLE ITLE ITLE ITLE ITLE ITLE ITLE I	ADDRESS 1-ZIP ADDRESS -ZIP ADDRESS		Char	ge Addition ge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME	FT.LAUDERDALE FL	☐ DELETE	2.2 Nv 2.3 ST 2. 4 C 3.1 TT 3.2 Nv 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 5.1 TT 5.2 Nv 5.3 ST 5.4 CC 6.1 TT 6.2 Nv	AME IREET, ITLE AME ITREET, ITLE AME IREET, ITLE AME	ADDRESS r-ZIP ADDRESS -ZIP ADDRESS -ZIP		☐ Char	ge Addition ge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	FT.LAUDERDALE FL	☐ DELETE	2.2 Nv 2.3 ST 2.4 C 3.1 TT 3.2 Nv 3.3 ST 3.4 C 4.1 TT 4.2 N 4.3 ST 5.1 TT 5.2 Nv 5.3 ST 6.1 TT 6.2 Nv 6.3 ST	AME IREET, ITLE AME ITREET, ITLE AME IREET, ITLE AME	ADDRESS T-ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP		☐ Char	ge Addition ge Addition	

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 607, Florida Statutes; and that my name appears in Block 13 if chapged, or on an attachment/with an address, with all other like empowered.