


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90399 008 ****61.25

DOCUMENT # 705586			
1. Entity Name PENNSYLVANIA CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1511 S.E. 15TH COURT DEERFIELD BCH, FL 33441 US		Mailing Address 500 NE SPANISH RIVER BLVD STE #18 BOCA RATON, FL 33431 US	
2. Principal Place of Business - No P.O. Box # 500 NE Spanish River Blvd		3. Mailing Address Suite, Apt. #, etc. Ste 18	
City & State Boca Raton FL		City & State FL	
Zip 33431		Country US	
4. FEI Number 59-2769588		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILLIS, ERNEST W C/O BEACON PROPERTY MGMT., INC. 500 NE SPANISH RIVER BLVD. #18 BOCA RATON, FL 33431		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
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	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D YOUNG, GEORGE 1511 SE 15 CT 405 DEERFIELD BEACH, FL 33441 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hector Mayol T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1511 SE 15 COURT #306 DEERFIELD BEACH FL 33441
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D FORMICOLA, MARILYN 1511 SE 15TH COURT, #102 DEERFIELD BEACH, FL 33441 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Young, George D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1511 SE 15th court, #405 DEERFIELD BEACH FL 33441
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D WOODLAND, EILEEN 3620 STONECREEK CRES. MISSISSAUGA, ONTARIO CANADA, M4V357 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D JUNEMAN, NINA 1511 SE 15TH CT #301 DEERFIELD BEACH, FL 33441 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D VALESTIN, LINDA 1511 SE 15TH COURT, #502 DEERFIELD BEACH, FL 33441 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOECHER, JOHN 151 SE 15 CT #305 DEERFIELD BEACH, FL 33441 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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>Nina Juneman</i></u>		Date: <u>4/27/07</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	