


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 15, 2008 8:00 am
Secretary of State

1008

05-15-2008 90031 007 ****61.25

DOCUMENT # 716272
 1. Entity Name
PARK SOUTH NINE, INC. A CONDOMINIUM



Principal Place of Business Mailing Address
1310 NW 43RD AVENUE LAUDERHILL FL 33313



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

1st MOORE CR2E037 (10/07)

6. Name and Address of Current Registered Agent
WILLIAMS, GLORIA
1310 NW 43RD AVE
LAUDERHILL FL 33313

7. Name and Address of New Registered Agent
 Name **Dorothy H Kennedy**
 Street Address (P.O. Box Number is Not Acceptable) **1310 NW 43rd Avenue - 209**
 City **Lauderhill** FL Zip Code **33313-5747**

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 *Dorothy H Kennedy* DATE **04-23-2008**
Signature, typed or printed name of registered agent and title (separate). (NOTE: Registered Agent signature is required when reinstating)

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	TENNY, BETTY	
STREET ADDRESS	1310 NW 43 RD AVE #105	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	ST	<input type="checkbox"/> Delete
NAME	KENNEDY, DOROTHY H	
STREET ADDRESS	1310 NW 43RD AVE #209	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE	P	<input type="checkbox"/> Delete
NAME	WILLIAMS, GLORIA	
STREET ADDRESS	1310 NW 43RD AVE #110	
CITY-ST-ZIP	LAUDERHILL FL 33313	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LORETTE MORGAN	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIROLAMO MANNINO	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHERIE MICKENS	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Dorothy H Kennedy* DATE: **04-23-2008** **9/4/06-4/25**