

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90027 041 ****61.25

DOCUMENT # 732277
 1. Entity Name
 DESOTO PARK NORTH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
 1926 ATLANTIC SHORES BLVD.,
 HALLANDALE, FL 33009

Mailing Address
 1926 ATLANTIC SHORES BLVD.,
 HALLANDALE, FL 33009

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

40055333

02062008 Chg-NP CR2E037 (12/06)

4. FEI Number
 59-1592441

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SCHMEIZER, JOAN
 1926 ATLANTIC SHORES BLVD
 HALLANDALE, FL 33009

7. Name and Address of New Registered Agent
 Name: Lloyd W. Procton, P.A.
 Street Address (P.O. Box Number is Not Acceptable): 400 SE 18th Street
 City: Fort Lauderdale
 State: FL Zip Code: 33316

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: Lloyd W. Procton, Esquire 2/20/08
 (NOTE: Registered Agent signature required when reinstating)

Filing 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	NISSENBERG, PAUL	1001-THREE ISLANDS BLVD	HALLANDALE, FL 33009	<input type="checkbox"/>
VP	TOLEMAN, CANDECE	2001 ATLANTIC SHORES BLVD	HALLANDALE, FL 33009	<input type="checkbox"/>
T	CONNOR, COLETTE	1951 ATLANTIC SHORE BLVD	HALLANDALE, FL 33009	<input type="checkbox"/>
S	WILLIAMS, JEAN	2161 ATLANTIC SHORE BLVD	HALLANDALE, FL 33009	<input type="checkbox"/>
D	GORDZALEZ, PABLO	1951 ATLANTIC SHORE BLVD	HALLANDALE, FL 33009	<input type="checkbox"/>
D	GIELLA, TONY	2001 ATLANTIC SHORE BLVD	HALLANDALE, FL 33009	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Paul Nissenberg, President 2/27/08 954 525-1008
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #