

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2007 8:00 am
Secretary of State

02-13-2007 90013 018 ****61.25

DOCUMENT # 749632	
1. Entity Name PAR 4 CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 3136 FINSTERWALD DR #3 TITUSVILLE FL 32780 US	Mailing Address 3136 FINSTERWALD DR #3 TITUSVILLE FL 32780 US
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2. Principal Place of Business - No P.O. Box # 3136 Finsterwald Dr	3. Mailing Address 3136 Finsterwald Dr
Suite, Apt. #, etc. # 3	Suite, Apt. #, etc. # 3

1st MOORE CR2E037 (10/06)

City & State Titusville, FL	City & State Titusville, FL
Zip 32780	Zip 32780
Country USA	Country USA

4. FEI Number 59-2172407	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LIVINGSTON, SHARON K 3136 FINSTERWALD DR #3 TITUSVILLE FL 32780	
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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 Sharon K. Livingston	DATE 2/14/2007
(NOTE: Registered Agent signature required when reinstating)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD HILL, JANIS 1485 WELLINGTON CIR ROCKLEDGE FL 32955 ☐ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	STD LIVINGSTON, SHARON K 3136 FINSTERWALD DR #3 TITUSVILLE FL 32780 ☐ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	VP TABLAR, SHIRLEY 3140 FINSTERWALD DR, #4 TITUSVILLE FL 32780 ☒ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY ST ZIP	Vice President/Director HILL, Janis 1485 Wellington Cir Rockledge FL 32955 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	President/Director ULmer Gerald 3132 Finsterwald Dr #7 Titusville, FL 32780 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	Director Kimberly Mendoza 3132 Finsterwald Dr #2 Titusville, FL 32780 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition

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: Sharon K. Livingston	Sharon K. Livingston, STD	2/14/07	321-267-0980
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			