

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 16, 2009
Secretary of State

DOCUMENT# 750748

Entity Name: PARKWAY TOWERS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**15600 NW 7 AVE
OFFICE
MIAMI, FL 33169**New Principal Place of Business:****Current Mailing Address:**PO BOX 94012
MIAMI, FL 33269**New Mailing Address:**15600 NW 7 AVE
OFFICE
MIAMI, FL 33169**FEI Number:** 59-1447824**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SILBERMAN, GARY PA
2665 SOUTH BAYSHORE DRIVE
STE #725
COCONUT GROVE, FL 33133 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: FLEURANVIL, FABIOLA
Address: P.O. BOX 681342
City-St-Zip: MIAMI, FL 33168

Title: TREA () Delete
Name: FLOWERS, KAREN
Address: 15600 NW 7TH AVE # 714
City-St-Zip: MIAMI, FL 33169

Title: SECT () Delete
Name: NUNEZ, MEGIE SECT
Address: 15600 NW 7AVE #7
City-St-Zip: MIAMI, FL 33169

Title: VP (X) Delete
Name: MICHAEL, MURRAY VP
Address: 15600 NW 7AVE # 817
City-St-Zip: MIAMI, FL 33169

Title: DIR (X) Delete
Name: ELI, BELLUNE DIR
Address: 15600 NW 7 AVE # 805
City-St-Zip: MIAMI, FL 33169

Title: DIR (X) Delete
Name: BASSETTER, JEAN DIR
Address: PO BOX 640884
City-St-Zip: MIAMI, FL 33164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE (X) Change () Addition
Name: FACEY, ENID DIRECTO
Address: 15600 NW 7TH AVE, #607
City-St-Zip: MIAMI, FL 33169

Title: TREA (X) Change () Addition
Name: SAPPLETON, ANTOINETTE TREASUR
Address: 15600 NW 7TH AVE # 815
City-St-Zip: MIAMI, FL 33169

Title: DIR (X) Change () Addition
Name: STEPHEN, FRANCIS
Address: 15600 NW 7TH AVE #312
City-St-Zip: MIAMI, FL 33169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTOINETTE SAPPLETON

TREA

11/16/2009

Electronic Signature of Signing Officer or Director

Date