

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 16, 2009
Secretary of State**

DOCUMENT# 753245

Entity Name: PALM SPRINGS VILLAGE CONDOMINIUM ASSOCIATION,INC

Current Principal Place of Business:

9365 W. SAMPLE ROAD
#203
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

9365 W SAMPLE RD
#203
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

CONDO MANAGEMENT ALTERNATIVE
P.O. BOX 8506
CORAL SPRINGS, FL 33075 US

New Mailing Address:

FEI Number: 59-2148061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CONDO MANAGEMENT ALTERNATIVE, INC.
9365 WEST SAMPLE ROAD
#203
CORAL SPRINGS, FL 33065 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VALENTE, RALPH
Address: P.O. BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: STD (X) Change () Addition
Name: VIENS, BARBARA
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: VD () Delete
Name: OKEN, ANDREA
Address: 2562 CORAL SPRINGS DR
City-St-Zip: POMPANO BEACH, FL 33065

Title: PD (X) Change () Addition
Name: OKEN, ANDREA
Address: PO BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

Title: PTD (X) Delete
Name: ZORRILLA, TEOFANES
Address: P.O. BOX 8506
City-St-Zip: CORAL SPRINGS, FL 33075

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: ANDREA OKEN

PD

06/16/2009

Electronic Signature of Signing Officer or Director

_____ Date