

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jun 13, 2011  
Secretary of State**

DOCUMENT# N05000003668

Entity Name: PROMENADE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

ACCESS RESIDENTIAL MANAGEMENT  
5728 MAJOR BOULEVARD, SUITE 502  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

ACCESS RESIDENTIAL MANAGEMENT  
5728 MAJOR BOULEVARD, SUITE 502  
ORLANDO, FL 32819

**New Mailing Address:**

FEI Number: 20-2656581      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WONSETLER, KAREN P.A.  
860 N. ORANGE AVENUE  
SUITE 135  
ORLANDO, FL 32801 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: PD  
Name: KASPER, BILL  
Address: 860 N.ORANGE AVE STEB  
City-St-Zip: ORLANDO, FL 32801

Title: VD  
Name: PORTER, ADRIAN  
Address: 860 N.ORANGE AVE STE B  
City-St-Zip: ORLANDO, FL 32801

Title: TD  
Name: SOLOMON, JUNE  
Address: 860 N ORANGE AVE STE B  
City-St-Zip: ORLANDO, FL 32801

Title: D  
Name: WERMUTH, SUSAN  
Address: 860 N ORANGE AVE STE B  
City-St-Zip: ORLANDO, FL 32801

I hereby 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 all other like empowered.

SIGNATURE: KASPER BILL

PD

06/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date