


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


CENTRAL PARK LV 0789
 BY OK TO FILED
 Mar 17, 2008 08:00 A
 GL CODE Secretary of State
 DATE 3/17/08

DOCUMENT # N05000009144
 1. Entity Name
 CENTRAL PARK LV CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 9101 LEE VISTA BLVD ORLANDO, FL 32829	Mailing Address 9101 LEE VISTA BLVD ORLANDO, FL 32829
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02272008 No Chg-NP CR2E037 (4/06)

4. FEI Number 03-0572995	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MENIFEE, VICKIE
 9101 LEE VISTA BLVD
 ORLANDO, FL 32829

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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: Vickie Menfee DATE: 3/5/08
Signature, typed or printed name of registered agent and title if applicable (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**

000003861333
 04/03/08-80007-013 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MENIFEE, VICKIE 9101 LEE VISTA BLVD ORLANDO, FL 32829
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GIBSON, NATALIE 9101 LEE VISTA BLVD ORLANDO, FL 32829
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHAPMAN, JASON 9101 LEE VISTA BLVD ORLANDO, FL 32829
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERA, CARLOS 9101 LEE VISTA BLVD. ORLANDO, FL 32829
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CEDENO, GINA 9101 LEE VISTA BLVD ORLANDO, FL 32829
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 I am empowered

SIGNATURE: Vickie Menfee DATE: 3/5/08 DAYTIME PHONE #: 407 384-5663
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR