

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED


2010 JUL -2 A 9 11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600182869346
07/02/10--01035--002 **61.25

DO NOT WRITE IN THIS SPACE

DOCUMENT # N06000000460
1. Entity Name
WALDEN PALMS CONDOMINIUM ASSOCIATION, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4700 Walden Circle
Suite, Apt. #, etc.

3. Mailing Address
4700 Walden Circle
Suite, Apt. #, etc.

City & State
Orlando FL

City & State
Orlando FL

Zip
32811

Country
US

Zip
32811

Country
US

4. FEI Number 20 - 4767229

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name Charles A. Strode

Street Address (P.O. Box Number is Not Acceptable)
4700 Walden Circle

City Orlando FL Zip Code 32811

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  Charles A. Strode - Interim Manager 06/24/2010

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.) DATE

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

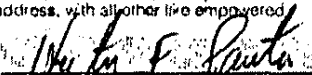
Make Dues Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director - Eric Amkhinich 4732 Walden Circle, # 1223 Orlando FL 32811		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Sec/Treas - Shane Merali 1153 Mulder Ave, Ottawa ON CANADA K4A4G9		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice-President - Hector Pauta, Jr. 4748 Walden Circle, #835 Orlando FL 32811		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President - Donghul Wu PO Box 721974 Orlando FL 32872-1794		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
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 exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other live employees.

SIGNATURE:  Hector Pauta, Jr., Vice-Pres 06/24/2010 407-237-0980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DATE OF FILING

CR2E037B (12/02)