2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005763

FILED May 05, 2008 Secretary of State

Entity Name: PARKSIDE COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

142 W. PLATT STREET TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

142 W. PLATT STREET TAMPA, FL 33606

FEI Number: FEI Number Applied For (X) 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:

TERRELL, COURTENAY S 101 S. FRANKLIN STREET SUITE 101 TAMPA, FL 33602 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:

- Clarker in Circumstance of Desighans of Assert

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PVST (X) Change () Addition

Name:FARRELL, TODD MName:PHILLIPS, DONALD E IIIAddress:400 SOUTH TYRON STREET #1300Address:142 W PLATT STREET

City-St-Zip: CHARLOTTE, NC 28285 City-St-Zip: TAMPA, FL 33606

Title: VD (X) Delete Title: () Change () Addition

 Name:
 WESTON, JULIE
 Name:

 Address:
 400 SOUTH TYRON STREET #1300
 Address:

 City-St-Zip:
 CHARLOTTE, NC 28285
 City-St-Zip:

Title: STD (X) Delete Title: () Change () Addition

 Name:
 NATWICK, BRIAN J
 Name:

 Address:
 400 SOUTH TYRON STREET #1300
 Address:

 City-St-Zip:
 CHARLOTTE, NC 28285
 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: DONALD E. PHILLIPS, III PVST 05/05/2008