2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# N44045

Entity Name: PROVIDENCIA PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1201 NORTH FLAGLER DRIVE
W PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1201 NORTH FLAGLER DRIVE
W PALM BEACH, FL 33401

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAYANS, STEVEN A.
1201 NORTH FLAGLER DRIVE
W PALM BEACH, FL 33401 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:	D	( ) Delete
Name:	SHORR, ROBERT	
Address:	254 NINTH STREET	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	SD	( ) Delete
Name:	COMISKEY, KELLEY	
Address:	229 NINTH STREET	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	D	( ) Delete
Name:	MASSEY, JAN	
Address:	1007 NORTH FLAGLER DRIVE	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	DP	( ) Delete
Name:	MAYANS, STEVEN A	
Address:	1201 NORTH FLAGLER DRIVE	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	TD	( ) Delete
Name:	REAMES, GRACE	
Address:	234 NINTH STREET	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	VPD	( ) Delete
Name:	SLOANE, JAY	
Address:	233 EIGHTH STREET	
City-St-Zip:	WEST PALM BEACH, FL 33401	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: STEVEN A. MAYANS D/P 01/07/2008

Electronic Signature of Signing Officer or Director — Date