

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009801

FILED
Apr 28, 2009
Secretary of State

Entity Name: PARK PLACE AT MIDWAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2450 S.W. 137 AVE SUITE 226
MIAMI, FL 33175

New Principal Place of Business:

10556 NW 26 ST
D-203
MIAMI, FL 33172

Current Mailing Address:

10556 NW 26 ST
D-203
MIAMI, FL 33172

New Mailing Address:

FEI Number: 26-0732032 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROMERO, JORGE
2450 S.W. 137 AVE SUITE 226
MIAMI, FL 33175 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: DP () Delete
Name: ROMERO, JORGE
Address: 2450 S.W. 137 AVE SUITE 226
City-St-Zip: MIAMI, FL 33175

Title: DS () Delete
Name: PAPU, SAMUEL
Address: 2450 S.W. 137 AVE SUITE 226
City-St-Zip: MIAMI, FL 33175

Title: DT () Delete
Name: ROMERO, LUIS M
Address: 2450 S.W. 137 AVE SUITE 226
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: VIERA, HERMAN
Address: 7989 NW 8TH STREET #100D
City-St-Zip: MIAMI, FL 33126

Title: VD (X) Change () Addition
Name: GONZALEZ, ANTHONY
Address: 7995 NW 8TH STREET, # 105C
City-St-Zip: MIAMI, FL 33126

Title: TD (X) Change () Addition
Name: PAPU, SAMUEL
Address: 1250 EAST HALLANDALE BLVD, STE 1004
City-St-Zip: HALLANDALE BEACH, FL 33009

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: SAMUEL PAPU

TD

04/28/2009

Electronic Signature of Signing Officer or Director

Date