

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711652

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** PARK SOUTH ONE, INC. (A CONDOMINIUM)

**Current Principal Place of Business:**

4800 N. STATE ROAD 7  
SUITE 105  
LAUDERHILL, FL 33313 US

**New Principal Place of Business:**

**Current Mailing Address:**

4800 N. STATE ROAD 7  
SUITE 105  
LAUDERHILL, FL 33313 US

**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:**

PHOENIX MANAGEMENT SERVICES  
4800 N. STATE ROAD 7  
SUITE 105  
LAUDERDALE LAKES, FL 33319 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: P ( ) Delete  
Name: EDWARDS, ATTLEE  
Address: 1521 NW 43 AVE #102  
City-St-Zip: LAUDERHILL, FL 33313

Title: D ( ) Delete  
Name: FIELDS, OLIVE  
Address: 1511 NW 43 AVE #107  
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: D ( ) Delete  
Name: HUTTON, MARY  
Address: 1501 NW 43 AVE 101  
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: V ( ) Delete  
Name: PRESCOTT, JOHN  
Address: 1501 N.W. 43 AVE #104  
City-St-Zip: LAUDERHILL, FL 33313

Title: D ( ) Delete  
Name: WILLIAMS, CLIVE  
Address: 1511 NW 43 AVE 201  
City-St-Zip: LAUDERHILL, FL 33313

Title: D ( ) Delete  
Name: JONES, LILLIETH  
Address: 1511 NW 43RD AVENUE  
City-St-Zip: LAUDERHILL, FL 33313

**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: FRANKLIN J TACHER

LCAM

01/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date