

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713260

FILED
May 18, 2009
Secretary of State

Entity Name: PARK SOUTH THREE, INC., A CONDOMINIUM

Current Principal Place of Business:

4800 N. STATE ROAD 7
105F
LAUDERDALE LAKES, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

4800 N. STATE ROAD 7
105F
LAUDERDALE LAKES, FL 33319 US

New Mailing Address:

FEI Number: 59-1264128 FEI Number Applied For () 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:

PHOENIX MANAGEMENT SERVICES, INC.
4800 N STATE ROAD 7
SUITE 105F
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: REID, BERTHA
Address: 1321 NW 43RD AVE #106
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: JEVREMOV, DUSHAN
Address: 1311 N.W. 43 AVE
City-St-Zip: LAUDERHILL, FL

Title: DS () Delete
Name: JEVREMOV, MARIA
Address: 1300 NW 43RD TER
City-St-Zip: LAUDERHILL, FL 33313

Title: DT () Delete
Name: BLACK, KENNETH
Address: 1311 NW 43RD AVE
City-St-Zip: LAUDERHILL, FL 33313

Title: D (X) Delete
Name: MCLEMORE, GERTRUDE
Address: 1321 NW 43RD AVE, UNIT 12-202
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:

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: FRANK TACHER

LCAM

05/18/2009

Electronic Signature of Signing Officer or Director

_____ Date