


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90075 010 ****61.25

DOCUMENT # 723967	
1. Entity Name PARK PLAZA CONDOMINIUM ASSOCIATION, INC	

40038117

Principal Place of Business 1100 E INDIANTOWN ROAD BLDG 3 #300 JUPITER, FL 33477 US	Mailing Address 1100 E INDIANTOWN ROAD BLDG 3 #300 JUPITER, FL 33477 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



01042007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-1460608	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent PAPAGEORGE, TERRI 185 E INDIANTOWN RD SUITE 127 JUPITER, FL 33477	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KORSZNAK, PETER 1100 E. INIAN TOWN #103 JUPITER, FL 33477 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Beverly Kendrick 204 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1100 E Indiantown Rd Jupiter, Fla. 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCDONALD, JACK 1100 E INDIANTOWN #404 JUPITER, FL 33477 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Myra Gittere 208 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1100 E Indiantown Rd Jupiter, Fla. 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HARRING, TEDRA 1100 E. INDIANTOWN #106 JUPITER, FL 33477 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	George Rapp <input type="checkbox"/> Change <input type="checkbox"/> Addition 1100 E Indiantown Rd Jupiter, Fla. 33477
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEICHTI, JAMES 1100 E INDIANTOWN #412 JUPITER, FL 33477 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WAGENTI, MARIAN 1100 INDIANTOWN #303 JUPITER, FL 33477 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Marian Maglente Pres. 3-12-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #