

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725646

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: PARK AVENUE VILLAS CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

2318 S PRK AVE  
SANFORD, FL 32771 US

## New Principal Place of Business:

2318 S PARK AVE  
SANFORD, FL 32771 US

## Current Mailing Address:

2318 S PRK AVE  
SANFORD, FL 32771 US

## New Mailing Address:

2318 S PARK AVE  
SANFORD, FL 32771 US

FEI Number: 59-2159268

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTIN, ANNA  
2318 S PARK AVE  
SANFORD, FL 32771 US

## Name and Address of New Registered Agent:

MARTINO, ANNA  
2318 S PARK AVE  
SANFORD, FL 32771 US

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: ANNA MARTINO

02/23/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: MOHAMMED, RACHEL  
Address: 2310 S. PARK AVE.  
City-St-Zip: SANFORD, FL 32771

Title: P ( ) Delete  
Name: GARCUS, JAIMI  
Address: 2308 S PRK AVE  
City-St-Zip: SANFORD, FL 32771

Title: VP ( ) Delete  
Name: SWALINA, SHARON  
Address: 2316 S PRK AVE  
City-St-Zip: SANFORD, FL 32771

Title: T ( ) Delete  
Name: MARTINO, ANNA  
Address: 2318 S PRK AVE  
City-St-Zip: SANFORD, FL 32771

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: SWALINA, SHARON  
Address: 2308 S PARK AVE  
City-St-Zip: SANFORD, FL 32771

Title: VP (X) Change ( ) Addition  
Name: VOSS, SARAH  
Address: 2304 S PARK AVE  
City-St-Zip: SANFORD, FL 32771

Title: T (X) Change ( ) Addition  
Name: MARTINO, ANNA  
Address: 2318 S PARK AVE  
City-St-Zip: SANFORD, FL 32771

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: ANNA MARTINO

T

02/23/2009

Electronic Signature of Signing Officer or Director

Date