## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#732920** 

FILED Jun 23, 2009 Secretary of State

Entity Name: PARK PLACE OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1350 SAINT CHARLES PLACE PEMBROKE PINES, FL 33026

Current Mailing Address: New Mailing Address:

1350 SAINT CHARLES PLACE PEMBROKE PINES, FL 33026

FEI Number: 59-1604092 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: Name and Address of New Registered Agent:

GOBELI, MURRAY 1350 SAINT CHARLES PLACE PEMBROKE PINES, FL 33026 US

**OFFICERS AND DIRECTORS:** 

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

## ů ů

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDC ( ) Delete Title: PD (X) Change ( ) Addition Name: TOPOLSKY, HARRY J. DR. Name: KIBLER, DONALD

Address: 1000 ST. CHARLES PLACE Address: 1000 ST. CHARLES PLACE # 622
City-St-Zip: PEMBROKE PINES, FL City-St-Zip: PEMBROKE PINES, FL 33026

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 KOPPEL, LLOYD
 Name:
 SCHACHTER, JEFFERY

 Address:
 1400 ST. CHARLES PLACE
 Address:
 1200 ST. CHARLES PLACE #802

 City-St-Zip:
 PEMBROKE PINES, FL 33026
 City-St-Zip:
 PEMBROKE PINES, FL 33026

Title: SD () Delete Title: SD (X) Change () Addition Name: KIBLER, DONALD Name: KOPPEL, HENRY

 Address:
 1000 ST CHARLES PL
 Address:
 1300 ST CHARLES PLACE # 807

 City-St-Zip:
 PEMBROKE PINES, FL
 City-St-Zip:
 PEMBROKE PINES, FL 33026

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

Name: GOODMAN, BEN Name: GOODMAN, BEN

Address: 1100 ST. CHARLES PLACE Address: 1100 ST. CHARLES PLACE #510 City-St-Zip: PEMBROKE PINES, FL 33026 City-St-Zip: PEMBROKE PINES, FL 33026

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: MURRAY GOBELI GM 06/23/2009