

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 13, 2006
Secretary of State

DOCUMENT# 734628

Entity Name: PARKWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8600 NW 17 ST
145
DORAL, FL 33126

New Principal Place of Business:

Current Mailing Address:

8600 NW 17 ST
145
DORAL, FL 33126

New Mailing Address:

FEI Number: 59-1465545 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNIS EISINGER, P.A.
4000 HOLLYWOOD BLVD
STE 265S
HOLLYWOOD, FL 33021 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: PD () Delete
Name: MADIEDO, ILLIANA
Address: 9240 FONTAINBLEAU BLVD #204
City-St-Zip: MIAMI, FL 33172

Title: TD () Delete
Name: HERNANDEZ, IRIS
Address: 9270 FONTAINBLEAU BLVD # 404
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: DIEGO, JOSE
Address: 9170 FONTAINBLEAU BLVD # 104
City-St-Zip: MIAMI, FL 33172

Title: SD () Delete
Name: MORAN, ULISES
Address: 9170 FONTAINBLEAU BLVD # 103
City-St-Zip: MIAMI, FL 33172

Title: VP () Delete
Name: HERNANDEZ, LEONARDO
Address: 9170 FONTAINBLEAU BLVD #106
City-St-Zip: MIAMI, FL 33172

Title: DD () Delete
Name: FERNANDEZ, UTIMIO
Address: 9210 FONTAINBLEAU BLVD #106
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: ELIAS, ZAIRA
Address: 9210 FONTAINBLEAU BLVD # 205
City-St-Zip: MIAMI, FL 33172

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 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: ILIANA MADIEDO

Electronic Signature of Signing Officer or Director

P/D

11/13/2006

Date