

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734628

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: PARKWOOD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8600 NW 17 ST  
145  
DORAL, FL 33126

**New Principal Place of Business:**

1450 NW 87TH AVENUE  
SUITE 204  
DORAL, FL 33172

**Current Mailing Address:**

8600 NW 17 ST  
145  
DORAL, FL 33126

**New Mailing Address:**

1450 NW 87TH AVENUE  
SUITE 204  
DORAL, FL 33172

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

Title: D ( ) Delete  
Name: FERRER, MAURICIO  
Address: 9220 FONTAINBLEAU BLVD  
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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD/T (X) Change ( ) Addition  
Name: MADIEDO, ILLIANA  
Address: 9240 FONTAINBLEAU BLVD #204  
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 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: ILLIANA MADIEDO

PD/T

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date