

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# 740901

Entity Name: PARK PLAZA CONDOMINIUM OWNERS ASSOCIATION, PHASE II, INCORPORATED

Current Principal Place of Business:

5060 76TH AVENUE NORTH
APARTMENT 107
PINELLAS PARK, FL 33781 US

New Principal Place of Business:

Current Mailing Address:

5060 76TH AVENUE NORTH
APARTMENT 107
PINELLAS PARK, FL 33781 US

New Mailing Address:

FEI Number: 59-1744279 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WEIR, ALBERTA
5060 76TH AVENUE NORTH
#410
PINELLAS PARK, FL 33781 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: BECKETT, THOMAS
Address: 5060 76TH AVE, NORTH #312
City-St-Zip: PINELLAS PARK, FL 33781

Title: D () Delete
Name: PICARD, CHRISTINE
Address: 5060 76TH AVE N, #200
City-St-Zip: PINELLAS PARK, FL 33781

Title: TD () Delete
Name: WEIR, ALBERTA
Address: 5060 76 AVE N #410
City-St-Zip: PINELLAS PARK, FL 33781

Title: SD (X) Delete
Name: BACU, MARIN
Address: 5060 76TH AVE N, #403
City-St-Zip: PINELLAS PARK, FL 33781

Title: VD (X) Delete
Name: RADER, JACK
Address: 5060 76 AVE N #404
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: WEIR, ALBERTA
Address: 5060 76TH AVE N, #410
City-St-Zip: PINELLAS PARK, FL 33781

Title: SD (X) Change () Addition
Name: RADER, JACK
Address: 5060 76 AVE N #404
City-St-Zip: PINELLAS PARK, FL 33781

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: THOMAS BECKETT

PD

01/09/2009

Electronic Signature of Signing Officer or Director

_____ Date