

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 21, 2009**  
**Secretary of State**

DOCUMENT# 746986

**Entity Name:** PLAZA GARDENS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**3700 SOUTH OSPREY AVE  
SARASOTA, FL 34239 US**New Principal Place of Business:**PROKOP P.A.  
1188 N. TAMIAMI TRAIL UNIT 108  
SARASOTA, FL 34236 US**Current Mailing Address:**P.O. BOX 110156  
NAPLES, FL 34108 US**New Mailing Address:**PROKOP P.A.  
1188 N. TAMIAMI TRAIL UNIT 108  
SARASOTA, FL 34236 US**FEI Number:** 59-2001290**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WHITE, WILLIAM D  
2310 DELLA DR  
NAPLES, FL 34117 US**Name and Address of New Registered Agent:**PROKOP P.A.  
1188 N. TAMIAMI TRAIL UNIT 108  
SARASOTA, FL 34236 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: KENNETH PROKOP

07/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MORTON, ROGER D  
Address: 3700 S. OSPREY AVE #311  
City-St-Zip: SARASOTA, FL 34239

Title: DS ( ) Delete  
Name: HOPKINS, SANDRA  
Address: 3700 S OSPREY AVE., #202  
City-St-Zip: SARASOTA, FL 34239

Title: DT ( ) Delete  
Name: BURKYBILE, SANDRA J  
Address: 2039 HIBISCUS STREET  
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete  
Name: SIRUS, MICHAEL M  
Address: 3700 SOUTH OSPREY AVE #315  
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete  
Name: CONNOLLY, PETER  
Address: P.O. BOX 1371  
City-St-Zip: CENTER HARBOR, NH 032261371

Title: SMA (X) Delete  
Name: WHITE, WILLIAM D  
Address: 2310 DELLA DR  
City-St-Zip: NAPLES, FL 34117

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

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:

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: KENNETH PROKOP

MGR

07/21/2009

Electronic Signature of Signing Officer or Director

Date