

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748071

FILED
Jan 13, 2009
Secretary of State

Entity Name: PARKVIEW PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7300 WAYNE AVENUE
MIAMI BCH, FL 33141

New Principal Place of Business:

Current Mailing Address:

7300 WAYNE AVENUE
MIAMI BCH, FL 33141

New Mailing Address:

FEI Number: 59-2204199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARAY, HAYDEE
7300 WAYNE AVENUE
204
MIAMI BEACH, FL 33141 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: AT () Delete
Name: SCHLESINGER, VIOLET
Address: 7300 WAYNE AVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: P () Delete
Name: GARAY, HAYDEE
Address: 7300 WAYNE
City-St-Zip: MIAMI BEACH, FL 33141

Title: S (X) Delete
Name: SYKES, MARCIA
Address: 7300 WAYNE AVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: T () Delete
Name: CONTE, JOHN
Address: 7300 WAYNE AVE
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP () Delete
Name: HEFFERMAN, KEVIN
Address: 7300 WAYNE AVENUE
City-St-Zip: MIAMI BEACH, FL 33141

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:

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: JHON CONTE

T

01/13/2009

Electronic Signature of Signing Officer or Director

Date