## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED** May 13, 2009 **DOCUMENT# 756321** Secretary of State

Entity Name: THE PARK TOWNHOMES CONDOMINIUM NO. I ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

C/O FULL SERVICE PROPERTY MANAGEMENT 6801 NW 77 AVE 204

6921 NW 77TH AVE MIAMI, FL 33166 MIAMI, FL 33166

**New Mailing Address: Current Mailing Address:** 

C/O FULL SERVICE PROPERTY MANAGEMENT 6801 NW 77 AVE

6921 NW 77TH AVE 204 MIAMI, FL 33166 MIAMI, FL 33166

FEI Number: 59-1850995 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EISINGER, BROWN, LEWIS RENOVATIONS PROPERTY MANAGEMENT

PRESIDENTIAL CIRCLE SUITE 2655 6801 NW 77 AVE 4000 HOLLYWOOD BLVD 204 HOLLYWOOD, FL 33021 US MIAMI, FL 33166 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: RENOVATIONS PROPERTY MANAGEMENT 05/13/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete FERNANDEZ, JUAN SOTOLONGO, ISABEL Name: Name:

3614 SW 112 AVE Address: 6801 NW 77 AVE #204 Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33166

Title: Title: (X) Change ( ) Addition ( ) Delete

SOTOLONGO, ISABEL Name: SOTOLONGO, ISABEL Name: Address: 3614 SW 112 AVE Address: 6801 NW 77 AVE #204 City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33166

Title: PD () Delete Title: PD (X) Change ( ) Addition GOBERNA, MARIA C

FERREIRO, CARLOS A Name: Name: 3614 SW 112 AVE 6801 NW 77 AVE #204 Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33166

Title: (X) Delete Title: () Change () Addition

Name: FERREIRO, CARLOS Name: Address: 3626 SW 112 AVE Address: City-St-Zip: MIAMI, FL 33165 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: CARLOS FERREIRO Ρ 05/13/2009