

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756444

FILED
Jan 04, 2010
Secretary of State

Entity Name: PARK PLACE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

47 PARK PLACE
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

47 PARK PLACE
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-2161365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, KATHERINE
9 PARK TERRACE
ORMOND BEACH, FL 32174 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: PRES
Name: GREEN, KATHERINE
Address: 9 PARK TERRACE
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP
Name: PERRY, JUDITH
Address: 11 PARK PLACE
City-St-Zip: ORMOND BEACH, FL 32174

Title: SEC.
Name: GREENBAUM, ALYSE
Address: 3 PARK PLACE
City-St-Zip: ORMOND BEACH, FL 32174

Title: TRES
Name: MORRIS, BARBARA
Address: 320 PARK PLACE W.
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: BURT, GREGORY
Address: 21 PARK TERRACE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: GARRETT, DORIS
Address: 14 PARK TERRACE
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: BARBARA B. MORRIS

TRES

01/04/2010

Electronic Signature of Signing Officer or Director

Date