

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764938

FILED
Apr 10, 2007
Secretary of State

Entity Name: PAR SIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1303 SW 16TH TERR
CAPE CORAL, FL 33991 US

New Principal Place of Business:

Current Mailing Address:

2220 SW 21ST STREET
CAPE CORAL, FL 33991 US

New Mailing Address:

1303 SW 16TH TERR #102
CAPE CORAL, FL 33991 US

FEI Number: 65-0239360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILMAN, KIM
2220 SW 21ST STREET
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

BERNIER, KATHRYN
1303 SW 16TH TERR #102
CAPE CORAL, FL 33991 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: KATHRYN BERNIER

04/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HANCZAR, ROBERT
Address: 1303 SW 16TH TERR, #102
City-St-Zip: CAPE CORAL, FL 33991

Title: VD () Delete
Name: BERNIER, KATHLEEN
Address: 1303 SW 16TH TERR, #203
City-St-Zip: CAPE CORAL, FL 33991

Title: STD () Delete
Name: GILMAN, KIM
Address: 2220 SW 21ST STREET
City-St-Zip: CAPE CORAL, FL 33991

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: GILMAN, KIM
Address: 2220 SW 21ST STREET
City-St-Zip: CAPE CORAL, FL 33991

Title: STD (X) Change () Addition
Name: BERNIER, KATHRYN
Address: 1303 SW 16TH TERR, #102
City-St-Zip: CAPE CORAL, FL 33991

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHRYN BERNIER

STD

04/10/2007

Electronic Signature of Signing Officer or Director

Date