

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768552

FILED
Mar 14, 2009
Secretary of State

Entity Name: PLCA CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

11784 W SAMPLE RD
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

11784 W SAMPLE RD
CORAL SPRINGS, FL 33065 US

New Mailing Address:

11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 US

FEI Number: 59-2378176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED COMMUNITY MGMT. CORP.
11784 WEST SAMPLE RD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

UNITED COMMUNITY MGMT. CORP.
11784 WEST SAMPLE RD
#103
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL

03/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SILVER, LONNIE
Address: 161 NW 93RD AVE
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: GRAMLICH, CHRIS
Address: 9117 NW 1ST
City-St-Zip: PEMBROKE PINES, FL 33024

Title: P () Delete
Name: AL-IMAM, KAMAL
Address: 168 NW 92ND AVE.
City-St-Zip: PEMBORKE PINES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SILVER, LONNIE
Address: 161 NW 93RD AVE
City-St-Zip: PEMBROKE PINES, FL

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

Title: PD (X) Change () Addition
Name: AL-IMAM, KAMAL
Address: 168 NW 92ND AVE.
City-St-Zip: PEMBORKE PINES, FL

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: MARY LOU PALMER

AGT

03/14/2009

Electronic Signature of Signing Officer or Director

Date