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

FILED Jul 24, 2009 **DOCUMENT# 769635** Secretary of State

Entity Name: MY PLACE CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1756 - 1858 MY PLACE LANE WEST PALM BEACH, FL 33417 US **Current Mailing Address: New Mailing Address:** PO BOX 268222 WESTON, FL 33326 US FEI Number: 59-2356648 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: ESTIS, JEFFREY N 12821 SW 30TH STREET MIRAMAR, FL 33027 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition BLUMBERG, ARNOLD Name: Name: 4437 KENSINGTON PARKWAY Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BLUMBERG, STEVEN Name: Address: 4437 KENSINGTON PARKWAY Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: () Change () Addition TROY, JACOB Name: Name: 680 JUNIPER PLACE Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition PARKE, GLASITER JR. Name: Name: PARKE, GLASITER SR Address: 5460 SW 17TH STREET Address: 5460 SW 17TH STREET City-St-Zip: FORT LAUDERDALE, FL 33417 City-St-Zip: FORT LAUDERDALE, FL 33417 Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ARNIE BLUMBERG Т 07/24/2009

ALEXANDER, CLAUDETTE

DELRAY BEACH, FL 33445

3412 PLACE VALENCAY

Name:

Address:

City-St-Zip: