

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770103

FILED
Feb 24, 2009
Secretary of State

Entity Name: PARKSIDE VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 640508
BEVERLY HILLS, FL 344640508

New Principal Place of Business:

531 W. CHERRY LAUREL COURT
BEVERLY HILLS, FL 344653312 US

Current Mailing Address:

P. O. BOX 640508
BEVERLY HILLS, FL 344640508 US

New Mailing Address:

FEI Number: 59-2489770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOWNS, VALERIA
531 W. CHERRY LAUREL CT.
BEVERLY HILLS,, FL 34465 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: PD () Delete
Name: MCALLISTER, ROLAND
Address: 540 W. SAND OAK CT.
City-St-Zip: BEVERLY HILLS, FL 34465

Title: VD () Delete
Name: BRAATEN, LOUISE
Address: 655 W. WILD PINE CIRCLE
City-St-Zip: BEVERLY HILLS, FL 34465

Title: SD () Delete
Name: BOLEWARE, CLARETTE
Address: 29 SJ KELLNER BLVD
City-St-Zip: BEVERLY HILLS, FL 34465

Title: TD () Delete
Name: OREGA, RUTH
Address: 634 W. WILD PINE CIRCLE
City-St-Zip: BEVERLY HILLS, FL 34465

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEWSHER, ROBERT
Address: 646 W. WILD PINE CIRCLE
City-St-Zip: BEVERLY HILLS, FL 34465 US

Title: VD (X) Change () Addition
Name: GREGA, RUTH
Address: 634 W. WILD PINE CIRCLE
City-St-Zip: BEVERLY HILLS, FL 34465 US

Title: SD (X) Change () Addition
Name: TOWNS, VALERIA
Address: 531 W. CHERRY LAUREL COURT
City-St-Zip: BEVERLY HILLS, FL 34465

Title: TD (X) Change () Addition
Name: WAIBEL, SALLY
Address: 3830 N. BRIARBERRY POINT
City-St-Zip: BEVERLY HILLS, FL 34465

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: VALERIA TOWNS

SD

02/24/2009

Electronic Signature of Signing Officer or Director

Date