2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770764

FILED Mar 27, 2009 Secretary of State

Entity Name: 6000 PARK PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3001 EXECUTIVE DR. SUITE 260 CLEARWATER, FL 33762 **New Mailing Address: Current Mailing Address:** 3001 EXECUTIVE DR. 300 SOUTH DUNCAN AVENUE SUITE 260 SUITE 137 CLEARWATER, FL 33762 CLEARWATER, FL 33755 FEI Number: 59-2567602 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: CONDOMINIUM ASSOCIATES JOHN CONLEY, PA 3001 EXECUTIVE DR. SUITE 260 300 SOUTH DUNCAN AVENUE CLEARWATER, FL 33762 SUITE 137 CLEARWATER, FL 33755 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: JOHN CONLEY, PA 03/27/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete YENTZER, RICHARD Name: Name: 9987 FOURTH STREET N Address: Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: TD () Delete Title: () Change () Addition DICKMARY, MARY Name: Name: Address: 5549 PARK ST N. #212 Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition EATON, ADA HEATH, SANDRA Name: Name: 5775 PARK ST N. #441 5817 PARK ST N. #401 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: SAINT PETERSBURG, FL 33702 Title: VD () Delete Title: () Change () Addition Name: MAGIL, SHIRLEY Name: 5849 PARK ST. N. #309 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: Title: () Delete Title: () Change () Addition BRZOSTOWSKI, PAULA Name: Name: 9987 FOURTH ST. N Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip:

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: RICHARD YENTZER P 03/27/2009