

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000391

FILED
Jul 21, 2009
Secretary of State

Entity Name: PARK SHORE OPPORTUNITY OFFSHORE FUND LTD. COMPANY

Current Principal Place of Business:

C/O CAMPBELL CORPORATE SERVICES LIMITED
4TH FLOOR, SCOTIA CENTER, PO BOX 268
GRAND CAYMAN KY1-1104,

Current Mailing Address:

C/O CAMPBELL CORPORATE SERVICES LIMITED
4TH FLOOR, SCOTIA CENTER, PO BOX 268
GRAND CAYMAN KY1-1104,

FEI Number: 98-0560974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

New Principal Place of Business:

C/O CAMPBELL CORPORATE SERVICES LIMITED
4TH FLOOR, SCOTIA CENTER,
GRAND CAYMAN KY1-1104, KY 1-1104 KI

New Mailing Address:

C/O CAMPBELL CORPORATE SERVICES LIMITED
4TH FLOOR, SCOTIA CENTER, PO BOX 268
GRAND CAYMAN KY1-1104, KI 1-1104 KI

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BAER, DAN E
Address: 3838 TAMiami TRAIL NORTH
City-St-Zip: NAPLES, FL 34103

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: BARAKETT, PETER E
Address: 469 THIRD ST NORTH
City-St-Zip: NAPLES, FL 34102 US

Title: D () Change (X) Addition
Name: MARX, CHARLES B
Address: 35 EAST 85TH ST APT 5D NORTH
City-St-Zip: NEW YORK, NY 10028 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAN E BAER

D

07/21/2009

Electronic Signature of Signing Officer or Director

_____ Date