

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005536

FILED
Mar 13, 2009
Secretary of State

Entity Name: PARK PLACE AT KING'S MEADOW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13800 SW 144 AVE. RD.
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13800 SW 144 AVE. RD.
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-1047947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUITS, STEPHEN
LAND CAP PROPERTY SERVICES, INC.
13800 SW 144 AVE. RD.
MIAMI, FL 33186 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: LLAMA, MARLENE
Address: 14313 SW 96 ST 407
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: AVILA, MONICA
Address: 14301 SW 96 ST STE 701
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: MORALES, ENRIQUE
Address: 14313 SW 96 ST #402
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LLAMA, MARLENE
Address: 14313 SW 96 ST #407
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Change () Addition
Name: AVILA, MONICA
Address: 14301 SW 96 ST #701
City-St-Zip: MIAMI, FL 33186

Title: STD (X) Change () Addition
Name: MORALES, ENRIQUE
Address: 14313 SW 96 ST #402
City-St-Zip: MIAMI, FL 33186

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: MARLENE LLAMA

PD

03/13/2009

Electronic Signature of Signing Officer or Director

Date