2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007511

FILED Aug 19, 2009 Secretary of State

Entity Name: PROVINCE PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	
4223 LIRON AVE. #202			12021 NOKOMIS CT FORT MYERS, FL 33905 US	
	ERS, FL 33916	US		
Current Mailing Address:		New Mailing Address:		
P. O. BOX FORT MYE	7200 ERS, FL 33911	US		
FEI Number: 20-0191064 FEI Number Applied For() FEI Number Not Applicable() Certificate of Status Desired() In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
DEBOEST, RICHARD 2030 MCGREGOR BLVD FT. MYERS, FL 33901 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:				
	Electronic S	Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () Dele SNYDER, GLENN P.O. BOX 7200 FT. MYERS, FL 33:		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DV () Dele BLOCK, ALVIN P.O. BOX 7200 FT. MYERS, FL 33:		Title: Name: Address: City-St-Zip:	DV (X) Change () Addition LONDY, STEVE P.O. BOX 7200 FT. MYERS, FL 33911
Title: Name: Address: City-St-Zip:	DST () Del GRACZYK, RON P.O. BOX 7200 FT. MYERS, FL 33:		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Dele LONDY, STEVEN P.O. BOX 7200 FT. MYERS, FL 33:		Title: Name: Address: City-St-Zip:	D (X) Change () Addition MAZURE, RICH P.O. BOX 7200 FT. MYERS, FL 33911
Title: Name: Address: City-St-Zip:	D () Dele PEURANO, HEATHE P.O. BOX 7200 FT. MYERS, FL 33	ER M	Title: Name: Address: City-St-Zip:	D (X) Change () Addition PEURANO, HEATHER P.O. BOX 7200 FT. MYERS, FL 33911

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: HEATHER PEURANO D 08/19/2009