

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008409

FILED
Apr 15, 2009
Secretary of State

Entity Name: PARK PLACE AT PLANTATION COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

4373 ROCK ISLAND ROAD
LAUDERHILL, FL 33319

New Principal Place of Business:

Current Mailing Address:

4373 ROCK ISLAND RD
LAUDERHILL, FL 33319

New Mailing Address:

FEI Number: 33-1074939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL PROPERTY MGMT
4373 ROCK ISLAND ROAD
LAUDERHILL, FL 33319 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: TD () Delete
Name: KEIM, OMAR
Address: 769 NW 42 AVE
City-St-Zip: PLANTATION, FL 33317

Title: P () Delete
Name: DA SILVA, PATTY
Address: 673 NW 42ND AVE
City-St-Zip: PLANTATION, FL 33317

Title: VPT () Delete
Name: MORRILL, LEISA
Address: 773 NW 42ND AVE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: LA PIETRA, MICHAEL
Address: 789 NW 42ND AVE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: D () Delete
Name: PLEW, JEFFREY
Address: 707 NW 42 AVE
City-St-Zip: FORT LAUDERDALE, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPT (X) Change () Addition
Name: MORRILL, LISA
Address: 773 NW 42ND AVE
City-St-Zip: PLANTATION, FL 33317

Title: D (X) Change () Addition
Name: LA PIETRA, MICHAEL
Address: 789 NW 42ND AVE
City-St-Zip: PLANTATION, FL 33317

Title: D (X) Change () Addition
Name: PLEW, JEFFREY
Address: 707 NW 42 AVE
City-St-Zip: PLANTATION, FL 33317

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: PATTY DASILVA

PD

04/15/2009

Electronic Signature of Signing Officer or Director

Date