

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002353

FILED
Feb 06, 2009
Secretary of State

Entity Name: PARK CENTRAL NORTH OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

BYRSON DRIVE
NAPLES, FL 34109

New Principal Place of Business:

5515 BYRSON DRIVE
SUITE 502
NAPLES, FL 34109

Current Mailing Address:

COLONIAL SQUARE REALTY
PO BOX 10608
NAPLES, FL 34101

New Mailing Address:

5515 BYRSON DRIVE
SUITE 502
NAPLES, FL 34109

FEI Number: 20-0951748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLONIAL SQUARE REALTY INC
1048 GOODLETTE ROAD #201
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

MARC F. OATES, P.A.
5515 BRYSON DRIVE
SUITE 502
NAPLES, FL 34109 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: MARC F. OATES, ESQ.

02/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOZZO, SR, MICHAEL J
Address: 317 MOORINGLINE DR
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: GATES, TODD E
Address: 12810 TAMiami TRAIL NORTH
City-St-Zip: NAPLES, FL 34110

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: OATES, MARC F
Address: 5515 BRYSON DRIVE, SUITE 502
City-St-Zip: NAPLES, FL 34109

Title: VP/D (X) Change () Addition
Name: WILSON, CLINTON R
Address: 5495 BRYSON DRIVE, SUITE 421
City-St-Zip: NAPLES, FL 34109

Title: TSD () Change (X) Addition
Name: BOZZA, BRIAN
Address: 5490 BRYSON DRIVE, SUITE 201
City-St-Zip: NAPLES, FL 34109

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: MARC F. OATES

P/D

02/06/2009

Electronic Signature of Signing Officer or Director

Date