

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007178

FILED
Jan 20, 2009
Secretary of State

Entity Name: PYRAMID PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3550 WORK DRIVE
FORT MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

7980 SUMMERLIN LAKES DRIVE
SUITE 201
FORT MYERS, FL 33907

New Mailing Address:

8890 SALROSE LANE
SUITE 204
FORT MYERS, FL 33912

FEI Number: 20-1404967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RE/MAX EDGE- C/O BOBACK COMMERCIAL GROUP
13420 PARKER COMMONS BLVD
SUITE 106
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

RE/MAX EDGE- C/O BOBACK COMMERCIAL GROUP
8890 SALROSE LANE
SUITE 204
FORT MYERS, FL 33912 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:

01/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PEREZ, RAFAEL
Address: 3550 WORK DRIVE A-12
City-St-Zip: FORT MYERS, FL 33916

Title: VP () Delete
Name: COLLINS, DONALD W
Address: 8420 GLENNFINNAN DRIVE
City-St-Zip: FORT MYERS, FL 33912

Title: T () Delete
Name: THOMAS, CHARLES
Address: 959 IRIS DRIVE
City-St-Zip: FT. MYERS, FL 33903

Title: P (X) Delete
Name: HUDAK, MARTIN
Address: 3550 WORK DRIVE B-5
City-St-Zip: FORT MYERS, FL 33916

Title: S (X) Delete
Name: VARELA, ALEX
Address: 3550 WORK DRIVE B3-4
City-St-Zip: FORT MYERS, FL 33916

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HUDAK, MARTIN
Address: 3550 WORK DRIVE, B-5
City-St-Zip: FORT MYERS, FL 33916

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

Title: S/T (X) Change () Addition
Name: THOMAS, CHARLES
Address: 959 IRIS DRIVE
City-St-Zip: FT. MYERS, FL 33903

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

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

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: DENNIS BOBACK

RA

01/20/2009

Electronic Signature of Signing Officer or Director

Date