2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000692

FILED Mar 29, 2009 Secretary of State

Entity Name: PARKSIDE SPB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9050-9060 BLIND PASS ROAD ST PETE BEACH, FL 33706

Current Mailing Address: New Mailing Address:

112 SW MONROE CIR N SAINT PETERSBURG, FL 33703

FEI Number: 20-2233331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAY, GERRIE 112 SW MONROE CIR N SAINT PETERSBURG, FL 33703 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 Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PTD () Delete
 Title:
 PTD (X) Change () Addition

 Name:
 HAYRAPETIAN, IRENE
 Name:
 O'DONNELL, TIMOTHY

 Address:
 9060 BLINA PASS RD., 27
 Address:
 5747 HERON PARK PLACE

 City-St-Zip:
 SAINT PETERSBURG, FL 33706
 City-St-Zip:
 LITHIA,, FL 33540

Title: VPD () Delete Title: VPD (X) Change () Addition Name: RITCHIE, TERRY LOU Name: JONES, WILLIAM Address: 329 55TH AVE Address: 557 PINELLAS BAYWAY, UNIT 254

City-St-Zip: SAINT PETERSBURG, FL 33706 Salvess. 337 PINELLAS BATWAY, UNIT 254

Title:SD () DeleteTitle:SD (X) Change () AdditionName:BRADLEY, FIONAName:JONES, WILLIAMAddress:9960 BLIND PASS RD 21Address:557 PINELLAS BAYWAY, UNIT 254

City-St-Zip: SAINT PETERSBURG, FL 33706 City-St-Zip: TIERRA VERDE, FL 33715

Title: () Delete Title: TD () Change (X) Addition Name: ROSE, DANIEL

Address: Address: 2043 BAYOU GRANDE BLVD.
City-St-Zip: City-St-Zip: ST. PETERSBURG, FL 33703

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: TIM O'DONNELL PD 03/29/2009