

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:

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

New Principal Place of Business:

Current Mailing Address:

112 SW MONROE CIR N
SAINT PETERSBURG, FL 33703

New Mailing Address:

FEI Number: 20-2233331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAY, GERRIE
112 SW MONROE CIR N
SAINT PETERSBURG, FL 33703 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: PTD () Delete
Name: HAYRAPETIAN, IRENE
Address: 9060 BLINA PASS RD., 27
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: VPD () Delete
Name: RITCHIE, TERRY LOU
Address: 329 55TH AVE
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: SD () Delete
Name: BRADLEY, FIONA
Address: 9960 BLIND PASS RD 21
City-St-Zip: SAINT PETERSBURG, FL 33706

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: O'DONNELL, TIMOTHY
Address: 5747 HERON PARK PLACE
City-St-Zip: LITHIA, FL 33540

Title: VPD (X) Change () Addition
Name: JONES, WILLIAM
Address: 557 PINELLAS BAYWAY, UNIT 254
City-St-Zip: TIERRA VERDE, FL 33715

Title: SD (X) Change () Addition
Name: JONES, WILLIAM
Address: 557 PINELLAS BAYWAY, UNIT 254
City-St-Zip: TIERRA VERDE, FL 33715

Title: TD () Change (X) Addition
Name: ROSE, DANIEL
Address: 2043 BAYOU GRANDE BLVD.
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

Electronic Signature of Signing Officer or Director

Date