## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000006161

Apr 17, 2006 Secretary of State

Entity Name: FLORAL PARK CONDOMINIUM ASSOCIATION, INC.

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

5220 NW 72ND AVENUE SUITE 22 5220 NW 72ND AVENUE MIAMI, FL 33166

22

MIAMI, FL 33166

**Current Mailing Address: New Mailing Address:** 

5220 NW 72ND AVENUE SUITE 22 5220 NW 72ND AVENUE SUITE 22

MIAMI, FL 33166 MIAMI, FL 33166

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

VLACHOS, STAMATIOS CHIRDARIS, PETER 5220 NW 72ND AVENUE SUITE 22 5220 NW 72ND AVENUE MIAMI, FL 33166 US

MIAMI, FL 33166 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: PETER CHIRDARIS 04/17/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

VLACHOS, STAMATIOS PETER, CHIRDARIS Name: Name: 5220 NW 72ND AVENUE SUITE 22 Address: 5220 NW 72ND AVENUE SUITE 22 Address:

City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166

Title: VD ( ) Delete Title: () Change () Addition

Name: ALLEN, R. KEITH Name: Address: 5220 NW 72ND AVENUE SUITE 22 Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip:

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

CHIRDARIS, PETER Name: CHIRDARIS, PAUL Name:

5220 NW 72ND AVENUE SUITE 22 5220 NW 72ND AVENUE SUITE 22 Address: Address:

City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER CHIRDARIS PD 04/17/2006