

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N05000009144 1. Entity Name CENTRAL PARK LV CONDOMINIUM ASSOCIATION, INC.						FILED 07 JUL -6 PM 12: 06 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 9101 LEE VISTA BLVD ORLANDO, FL 32829				Mailing Address 9101 LEE VISTA BLVD ORLANDO, FL 32829			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 03-0572995				Applied For ☐ Not Applicable			
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
MENIFEE, VICKIE 9101 LEE VISTA BLVD ORLANDO, FL 32829				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE <i>Salgado B.E.</i> Signature, typed or printed name of registered agent and title if applicable.				DATE 6/19/07 (NOTE: Registered Agent signature required when reinstating)			
Amended AR is \$81.25				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
Make check payable to: Florida Department of State							
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10							
TITLE V	NAME MENIFEE, VICKIE			TITLE PRESIDENT	NAME VICKIE MENIFEE		
STREET ADDRESS 9101 LEE VISTA BLVD	CITY-ST-ZIP ORLANDO, FL 32829			STREET ADDRESS 9101 LEE VISTA BLVD.	CITY-ST-ZIP ORLANDO, FL 32829		
TITLE TD	NAME GIBSON, NATALIE			TITLE VICE PRESIDENT	NAME JASON CHAPMAN		
STREET ADDRESS 9101 LEE VISTA BLVD	CITY-ST-ZIP ORLANDO, FL 32829			STREET ADDRESS 9101 LEE VISTA BLVD.	CITY-ST-ZIP ORLANDO, FL 32829		
TITLE SD	NAME LONDONO, NATALIE			TITLE DIRECTOR	NAME CARLOS RIVERA		
STREET ADDRESS 9101 LEE VISTA BLVD	CITY-ST-ZIP ORLANDO, FL 32829			STREET ADDRESS 9101 LEE VISTA BLVD.	CITY-ST-ZIP ORLANDO, FL 32829		
TITLE D	NAME CHAPMAN, JASON			TITLE SECRETARY	NAME GINA CEDENO		
STREET ADDRESS 9101 LEE VISTA BLVD	CITY-ST-ZIP ORLANDO, FL 32829			STREET ADDRESS 9101 LEE VISTA BLVD.	CITY-ST-ZIP ORLANDO, FL 32829		
TITLE D	NAME CHAPMAN, JASON			TITLE 	NAME 		
STREET ADDRESS 	CITY-ST-ZIP 			STREET ADDRESS 	CITY-ST-ZIP 		

SIGNATURE: *Salgado B.E.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #