2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009543

FILED Apr 20, 2009 Secretary of State

Entity Name: PARKSIDE OFF FIFTH CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** PLATINUM PROPERTY MANAGEMENT LLC 1016 COLLIER CENTER WAY, SUITE 102 NAPLES, FL 34110 **Current Mailing Address: New Mailing Address:** PLATINUM PROPERTY MANAGEMENT LLC 1016 COLLIER CENTER WAY, SUITE 102 1016 COLLIER CENTER WAY, SUITE 102 NAPLES, FL 34110 NAPLES, FL 34110 FEI Number: 76-0801562 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: PLATINUM PROPERTY MANAGEMENT LLC PLATINUM PROPERTY MANAGEMENT, LLC 1016 COLLIER CENTER WAY, STE. #102 1016 COLLIER CENTER WAY, STE. #102 NAPLES, FL 34110 NAPLES, FL 34110 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: PLATINUM PROPERTY MANAGEMENT, LLC 04/20/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CALESHU, PETER Name: Name: 601 7TH AVE SOUTH #101 Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MENDIUS, TOM Name: Address: 601 7TH AVE. SOUTH #303 Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: () Change () Addition HUTCHISON, ROBBIE Name: Name: 601 7TH AVE. SOUTH #201 Address: Address: City-St-Zip: NAPLES, FL 34102 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: PETER CALESHU P 04/20/2009