2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2009
Secretary of State

DOCUMENT# N05000012186

Entity Name: COUNTRY PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2872 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

PO BOX 771238
CORAL SPRINGS, FL 33077

New Mailing Address:

FEI Number: 20-4323394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OLIVER, MICHAEL R
11010 SW 1 COURT
CORAL SPRINGS, FL 33071 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: PD ( ) Delete
Name: OLIVER, MICHAEL
Address: P.O. BOX 771238
City-St-Zip: CORAL SPRINGS, FL 33077

Title: VTD ( ) Delete
Name: SMITH, SHARON
Address: P.O. BOX 771238
City-St-Zip: CORAL SPRINGS, FL 33077

Title: SD ( ) Delete
Name: GROSS, RICHARD
Address: P.O. BOX 771238
City-St-Zip: CORAL SPRINGS, FL 33077

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: RICHMAN, MARSHA
Address: 2832 CORAL SPRINGS DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: MICHAEL OLIVER P 05/30/2009

Electronic Signature of Signing Officer or Director — Date