2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011949

FILED Apr 14, 2009 Secretary of State

ne: PARADIS	O CONDOMINIUM ASSOCIA	TION, INC.		
rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	33715			
lailing Addres	ss:	New Mailing Addres	ss:	
)				
20-5910293	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
BOULEVARD SSBURG, FL 3	33715 US	purpose of changing its registere	ed office or registered agent, or both,	
	nic Signature of Registered Ag	gent	 Date	
			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
SHAH, RAXIT 6025 SUN BOU	ILEVARD, SUITE 202	Title: Name: Address: City-St-Zip:	() Change() Addition	
SHAH, PUNIT 6025 SUN BOU	ILEVARD, SUITE 202	Title: Name: Address: City-St-Zip:	() Change () Addition	
	BLVD RSBURG, FL 3 Iailing Addres BOULEVARD RSBURG, FL 3 RSBURG, FL 3 RSBURG, FL 3 I Address of C XIT BOULEVARD RSBURG, FL 3 RSBURG, FL 3 RE: Electror S AND DIREC D () SHAH, RAXIT 6025 SUN BOU ST PETERSBU D () SHAH, PUNIT 6025 SUN BOU SHAH, PUNIT 6025 SUN BOU	RSBURG, FL 33715 Jailing Address: BOULEVARD RSBURG, FL 33715 20-5910293 FEI Number Applied For () J Address of Current Registered Agent: XIT BOULEVARD RSBURG, FL 33715 US In named entity submits this statement for the e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: D () Delete SHAH, RAXIT 6025 SUN BOULEVARD, SUITE 202 ST PETERSBURG, FL 33715 US D () Delete	BLVD RSBURG, FL 33715 Railing Address: BOULEVARD RSBURG, FL 33715 RSBURG, FL 33715 REI Number Applied For () FEI Number Not Applicable () Address of Current Registered Agent: Name and Address XIT BOULEVARD RSBURG, FL 33715 US Ramed entity submits this statement for the purpose of changing its register e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: D () Delete SHAH, RAXIT RO25 SUN BOULEVARD, SUITE 202 ST PETERSBURG, FL 33715 US City-St-Zip: D () Delete SHAH, PUNIT RO25 SUN BOULEVARD, SUITE 202 Address: City-St-Zip: Name: Name: Name: Name: Address:	

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: RAXIT SHAH D 04/14/2009