2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07502

FILED Jan 22, 2009 Secretary of State

Entity Name: PROVENCE CONDOMINIUM ASSOCIATION, INC.

	Principal Place of Business:	New Principal Place of Business:
	DE TR. S. TON, FL 33433 US	
Current N	Mailing Address:	New Mailing Address:
	DE TR. S. TON, FL 33433 US	
El Numbe	r: 59-2569338 FEI Number Ap	olied For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of Current Regist	red Agent: Name and Address of New Registered Agent:
6020 VER 105	S, HOWARD G DE TR. S. TON, FL 33433 US	
	e named entity submits this sta e of Florida.	ement for the purpose of changing its registered office or registered agent, or bot
SIGNATU	RE:	
	Electronic Signature of	Registered Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT
Γitle:	PTD () Delete	Title: () Change () Addition
Name: Nddress: City-St-Zip:	KOSTORIS, HOWARD G 6020 VERDE TRAIL SOUTH #105 BOCA RATON, FL 33433	Name: Address: City-St-Zip:
\ddress:	6020 VERDE TRAIL SOUTH #105	Name: Address:
Address: City-St-Zip: Title: Name: Address:	6020 VERDE TRAIL SOUTH #105 BOCA RATON, FL 33433 D () Delete ELWOOD, FLORENCE P 6050 VERDE TR. S. #407	Name: Address: City-St-Zip: Title: Name: Address:
oddress: Dity-St-Zip: Title: Jame: Address: Dity-St-Zip: Title: Jame: Address:	6020 VERDE TRAIL SOUTH #105 BOCA RATON, FL 33433 D () Delete ELWOOD, FLORENCE P 6050 VERDE TR. S. #407 BOCA RATON, FL 33433 D () Delete WEBER, HILARY 6080 VERDE TRAIL S #7010	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: D (X) Change () Addition Name: WEBER, HILARY Address: 6080 VERDE TRAIL S #701

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: HOWARD G. KOSTORIS P 01/22/2009