2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# N12693

Entity Name: PROVENCIAL SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7491 CONROY WINDMERE ROAD
SUITE A
ORLANDO, FL 328352762

New Principal Place of Business:

Current Mailing Address:

7491 CONROY WINDMERE ROAD
SUITE A
ORLANDO, FL 328352762

New Mailing Address:

FEI Number: 65-0019636 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INTERNATIONAL CINEMATOGRAPHERS GUILD
7463 CONROY WINDERMERE RD
SUITE A
ORLANDO, FL 32835 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: T ( ) Delete
Name: POSGAI, SCOTT S.,
Address: 7479 CONROY RD STE A
City-St-Zip: ORLANDO, FL

Title: VP ( ) Delete
Name: HUDSON, TODD
Address: 7485 CONROY WINDERMERE RD, STE D
City-St-Zip: ORLANDO, FL 32835

Title: S ( ) Delete
Name: GIANNESCHI, LARRY
Address: 7463 CONROY WINDERMERE RD STE A
City-St-Zip: ORLANDO, FL 32835

Title: P ( ) Delete
Name: MAHENDRA, SAMAROO
Address: 7463 CONROY WINDERMERE RD STE C
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: MAHENDRA SAMAROO PD 04/18/2008

Electronic Signature of Signing Officer or Director — Date