2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12794

FILED Feb 19, 2009 Secretary of State

Entity Name: PALMETTO LAKES PLAZA "R" CONDOMINILIM INC

Current Principal Place of Business:		New Principal Place of Business:		
	IST AVENUE			
JNIT B1 IIALEAH,	FL 33016	US		
Current Mailing Address:		New Mailing Address:		
	IST AVENUE			
JNIT B1 IIALEAH,	FL 33016	US		
El Number	: 59-1882508	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:		
000444				
1231 NW	JOHN M 62 COURT FL 33012	US		
1231 NW IIALEAH, he above in the State	62 COURT FL 33012 named entity of Florida.		purpose of changing its registere	ed office or registered agent, or both
1231 NW IIALEAH, he above	62 COURT FL 33012 named entity of Florida.			ed office or registered agent, or both Date
1231 NW IIALEAH, The above In the State SIGNATUI	62 COURT FL 33012 named entity of Florida.	y submits this statement for the onic Signature of Registered Ac	gent	
1231 NW IIALEAH, The above In the State SIGNATUI	62 COURT FL 33012 named entity e of Florida. RE: Electro S AND DIRE	onic Signature of Registered Age CTORS:) Delete ES S AVENUE	gent	Date
1231 NW IIALEAH, he above the State IGNATUI PFFICER: tte: ame: ddress:	f 62 COURT FL 33012 e named entity e of Florida. RE: Electro S AND DIRE VPD (HOUCK, JAM 8012 W 21ST HIALEAH, FL	r submits this statement for the poinc Signature of Registered Age CTORS: 1) Delete ES S TAVENUE 330161822 1) Delete RA VE	pent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: LAURA HOUCK DST 02/19/2009