2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# N18289

Entity Name: PARK PLACE VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2848 PROCTOR RD
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

2848 PROCTOR RD
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 59-2799747 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER MANAGEMENT SERVICES INC
2848 PROCTOR RD
SARASOTA, FL 34231 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: D ( ) Delete
Name: POWELL, JOHNNIE
Address: 3166 LAKE PARK LANE
City-St-Zip: SARASOTA, FL 34231

Title: PD ( ) Delete
Name: REVOU, ROBERT
Address: 3148 LAKE PARK LANE
City-St-Zip: SARASOTA, FL 34231

Title: TD ( ) Delete
Name: JOHNSTON, SID
Address: 3147 LAKE PARK LANE
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete
Name: HANEY, JAMES
Address: 3121 LAKE PARK LANE
City-St-Zip: SARASOTA, FL 34231

Title: SD ( ) Delete
Name: DUMBAUGH, WINNIFRED
Address: 3150 LAKE PARK LN.
City-St-Zip: SARASOTA, FL 34231

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:

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: SID JOHNSTON TREA 03/18/2009

Electronic Signature of Signing Officer or Director — Date