2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39400

FILED Mar 31, 2009 Secretary of State

Entity Name: PARKER PLACE ASSOCIATION, INC.

Current Principal Place of Business:					New Principal Place of Business:			
7257 NW 4 PMB 320		7 110						
GAINESVIL	LE, FL 32607	7 US						
Current Mailing Address:					New Mailing Address:			
7257 NW 4 ⁻ PMB 320 GAINESVIL	TH BLVD LE, FL 32607	7 US						
FEI Number:	59-3046415	FEI Number	Applied For ()	FEI Number	Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Regis	stered Agent:	Na	me and	Address o	of New Registered Agent:	
SOUTHER! 13103 SW 3 ARCHER, F		P US						
The above in the State		submits this s	tatement for the p	urpose of ch	anging it	s registere	ed office or registered agent, or both,	
SIGNATUR	E:							
	Electror	nic Signature o	of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:				AD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BM () CARSWELL, S 3229 SW 129T ARCHER, FL 3	H TERR					() Change () Addition	
Title: Name: Address: City-St-Zip:	BDM () LEWIS, GRETA 3019 SW 130T ARCHER, FL 3	H TERR					() Change () Addition	
Title: Name: Address: City-St-Zip:	P () SOUTHERN, EI 13103 SW 31S ARCHER, FL 3	T AVENUE					() Change () Addition	
Title: Name: Address: City-St-Zip:	BM () HOEHN, BILL 2906 S.W. 130 ARCHER, FL 3						() Change () Addition	
Title: Name: Address: City-St-Zip:	BM () DUFFEY, PAUL 12913 SW 28T ARCHER, FL 3	H PLACE					(X) Change()Addition TON, DARRYL . 125TH STREET FL 32618	
Title: Name: Address: City-St-Zip:	BM () BOGALES, KAT 12717 SW 31S ARCHER, FL 3	T AVE				BM BOGOLEA, 12717 SW ARCHER, F		

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: EDWARD SOUTHERN PRES 03/31/2009