2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N40479

Entity Name: PARK PLACE OF BAL HARBOUR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

90 PARK DR.
6
BAL HARBOUR, FL 33154 US

New Principal Place of Business:

Current Mailing Address:

90 PARK DR.
6
BAL HARBOUR, FL 33154 US

New Mailing Address:

FEI Number: 65-0225712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BRYAN, AUDREY S
90 PARK DR.
STE 6
BAL HARBOUR, FL 33154 US

Name and Address of New Registered Agent:

SOPHIE, DELAPLANE S
90 PARK DR.
STE 4
BAL HARBOUR, FL 33154 US

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: SOPHIE DELAPLANE 05/01/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DELAPLAINE, SOPHIE
Address: 90 PARK DR. #4
City-St-Zip: BAL HARBOUR, FL 33154

Title: T ( ) Delete
Name: NICOLAU, MINOLA
Address: 90 PARK DR., STE. 6
City-St-Zip: BAL HARBOUR, FL 33154

Title: S ( ) Delete
Name: PEREZ, YVETTE
Address: 90 PARK DR 1
City-St-Zip: MIAMI BEACH, FL 33154

Title: D (X) Delete
Name: WILCOX, BETTY
Address: 90 PRK DR 1
City-St-Zip: MIAMI BEACH, FL 33154

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: MINOLA NICOLAU T 05/01/2009
Electronic Signature of Signing Officer or Director Date