

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44045

FILED
Jan 18, 2009
Secretary of State

Entity Name: PROVIDENCIA PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1201 NORTH FLAGLER DRIVE
W PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1201 NORTH FLAGLER DRIVE
W PALM BEACH, FL 33401

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MAYANS, STEVEN A.
1201 NORTH FLAGLER DRIVE
W PALM BEACH, FL 33401 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: SHORR, ROBERT
Address: 254 NINTH STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD () Delete
Name: COMISKEY, KELLEY
Address: 229 NINTH STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: MASSEY, JAN
Address: 1007 NORTH FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DP () Delete
Name: MAYANS, STEVEN A
Address: 1201 NORTH FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD () Delete
Name: REAMES, GRACE
Address: 234 NINTH STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: VPD () Delete
Name: SLOANE, JAY
Address: 233 EIGHTH STREET
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: DE GUARDIOLA, MARLENE
Address: 1025 NORTH FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

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: STEVEN A. MAYANS

P

01/18/2009

Electronic Signature of Signing Officer or Director

Date