

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47405

FILED  
May 01, 2009  
Secretary of State

Entity Name: PARK CORNER CONDO ASSOCIATION, INC.

## Current Principal Place of Business:

1135 MERIDIAN AVENUE  
MIAMI BEACH, FL 33139 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 191042  
C/O AMERICAN PROPERTY MANAGEMENT SPC.  
MIAMI BEACH, FL 33119 US

## New Mailing Address:

FEI Number: 65-0383439 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:

AMERICAN PROPERTY MANAGEMENT SPECIALISTS  
1370 WASHINGTON AVE.  
SUITE 312  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

AMERICAN PROPERTY MANAGEMENT SPECIALISTS  
1354 WASHINGTON AVE.  
SUITE 225  
MIAMI BEACH, FL 33139 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: KRISTINA MANGOLD

05/01/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RODRIGUEZ, BARBARA  
Address: 1135 MERIDIAN AVE #1  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD ( ) Delete  
Name: MILLS, ROBERT  
Address: 1145 MERIDIAN AVE #11  
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD ( ) Delete  
Name: PAZDRO, TIMOTHY  
Address: 730 12TH STREET #9  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change ( ) Addition  
Name: TRAUB, WILLIAM  
Address: 1145 MERIDIAN AVENUE #9-10  
City-St-Zip: MIAMI BEACH, FL 33139

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: WILLIAM TRAUB

TD

05/01/2009

Electronic Signature of Signing Officer or Director

Date