

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 08, 2008
Secretary of State**

DOCUMENT# N93000000874

Entity Name: PARK SQUARE CONDO ASSOCIATION, INC.

Current Principal Place of Business:

1125 MERIDIAN AVE
#9
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1125 MERIDIAN AVE
#9
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 65-0383440 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCMAHON, JOE
1125 MERIDIAN AVE #2
MIAMI BEACH, FL 33139 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: DT () Delete
Name: POSSCHELLE, ANNE
Address: 1127 MERIDIAN AVENUE - #5
City-St-Zip: MIAMI BEACH, FL 33139

Title: DP () Delete
Name: MCCMAHON, JOE
Address: 1125 MERIDIAN AVENUE - # 2
City-St-Zip: MIAMI BEACH, FL 33139

Title: DS () Delete
Name: COHEN, AUDRA
Address: 1117 MERIDIAN AVENUE - #7
City-St-Zip: MIAMI BEACH, FL 33139

Title: DVP () Delete
Name: MOONEY, FRASER
Address: 1115 MERIDIAN AVENUE - #4
City-St-Zip: MIAMI BEACH,, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: KNIGHT, HEATHER
Address: 1115 MERIDIAN AVENUE - #3
City-St-Zip: MIAMI BEACH, FL 33139

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: JOE MCCMAHON

DP

04/08/2008

Electronic Signature of Signing Officer or Director

Date