

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001319

FILED
Apr 20, 2009
Secretary of State

Entity Name: PARK PLACE AT WYNDHAM LAKES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8726
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 52-2003065 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTEGRITY PROPERTY MGMT
C/O CYNTHIA WHITTLE
953 UNIVERSITY DR
CORAL SPRINGS, FL 33071 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: PD () Delete
Name: SHOW, ERIC
Address: 4759 NW 115TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VD () Delete
Name: FOSTER, DUNCAN
Address: 4930 NW 115TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: TD () Delete
Name: MCCUALEY, JOHN
Address: 11523 NW 51ST PLACE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: SD () Delete
Name: SAUNDERS, KEN
Address: 11533 NW 49TH CT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHAW, ERIC
Address: 4759 NW 115TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

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: D () Change (X) Addition
Name: RAHEMI, MEDHI
Address: 11533 NW 49TH COURT
City-St-Zip: CORAL SPRINGS, FL

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: ERIC SHAW

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date