

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 23, 2009
Secretary of State**

DOCUMENT# N95000005731

Entity Name: PALM SPRINGS TOWNMHOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

655 W 60 ST
#1
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

4445 WEST 16 AVE
#308
HIALEAH, FL 33012

New Mailing Address:

4445 WEST 16 AVE
#302
HIALEAH, FL 33012

FEI Number: 65-0754068 **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:

MOLINA, ARGELIO
655 W 68TH ST
APT 1
HIALEAH, FL 33014 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: MOLINA, ARGELIO
Address: 655 W 68 ST, #1
City-St-Zip: HIALEAH, FL 33014

Title: VD () Delete
Name: STANCHIO, JORGE
Address: 655 W 68 ST, #2
City-St-Zip: HIALEAH, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ARGELIO MOLINA

PD

06/23/2009

Electronic Signature of Signing Officer or Director

Date