## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000002587

Entity Name: PARK SO. 7 CONDOS, INC.

FILED Apr 26, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1490 NW 43 AVE., STE. 205 LAUDERHILL, FL 33313 **Current Mailing Address: New Mailing Address:** 1490 NW 43 AVE., STE. 205 LAUDERHILL, FL 33313 FEI Number: 59-1414538 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CROSBY, JEAN 1490 NW 43 AVE., STE. 205 LAUDERHILL, FL 33313 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LOWE, RUSSELL Name: Name: 1490 NW 43 AVE Address: Address: City-St-Zip: LAUDERHILL, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: KIMBALLL, KIMBALLL Name: Address: 4310 NW 12TH COURT Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BABAIEL, BEAULAC Name: GABRIAL, BEAULAC Name: 1490 NW 43 AVE Address: Address: 1490 NW 43 AVE City-St-Zip: LAUDERHILL, FL City-St-Zip: LAUDERHILL, FL Title: ( ) Delete Title: () Change () Addition Name: PLUMER, MIKE Name: Address: 1490 NW 43 AVE Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition WLIIAMS, CDESSA WILLIAMS, ADESSA Name: Name: 1490 NW 43RD AVE 1490 NW 43RD AVE Address: Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: LAUDERHILL, FL 33313 Title: () Delete Title: () Change () Addition WESCOTT, ELIZABETH Name: Name: Address: 1490 NW 43RD AVE Address: LAUDERHILL, FL City-St-Zip: 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: JEAN CROSBY PRES 04/26/2009