


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90153 026 ****61.25

DOCUMENT # N96000002726

1. Entity Name
 PARC PLAZA SOUTH BEACH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1775 WASHINGTON AVENUE MIAMI BEACH, FL 33139	Mailing Address 1775 WASHINGTON AVENUE MIAMI BEACH, FL 33139
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50009101



03222006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0705280	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

DIETZ, ALAN P
 1775 WASHINGTON AVE.
 200
 MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIETZ, ALAN 1775 WASHINGTON AVE MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MELENDEZ, MANNY 1775 WASHINGTON AVE MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DETRICK, BRIAN 1775 WASHINGTON AVE MIAMI BEACH, FL 33139 <i>Delete</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLDINGS, DENNIS 1775 WASHINGTON AVE MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CASTRO, LUIS 1775 WASHINGTON AVE MIAMI BEACH, FL 33139 <i>Delete</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T-S Freeman, Lloyd 1775 Washington Ave. Miami Beach, FL 33139

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dennis R. Hold* **3/30/06 (305) 538-8850**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #