# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 26, 2009**
**Secretary of State**

DOCUMENT# N96000006066

**Entity Name:** PARISIAN VILLAGE IN THE GROVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2907 JACKSON AVE
MIAMI, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

2907 JACKSON AVE
MIAMI, FL 33133 US

**New Mailing Address:**

2919 JACKSON AVE
MIAMI, FL 33133 US

**FEI Number: 65-0727842** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOLDSMITH, PAULINE
2907 JACKSON AVE
MIAMI, FL 33133 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: SINCLAIR, KAREN
Address: 2919 JACKSON AVE
City-St-Zip: MIAMI, FL 33133

Title: VPD ( ) Delete
Name: TESCHER, GAIL
Address: 2925 JACKSON AVE
City-St-Zip: MIAMI, FL 33133

Title: SD ( ) Delete
Name: GOLDSMITH, PAULINE
Address: 2927 JACKSON AVE
City-St-Zip: MIAMI, FL 33133

Title: DP ( ) Delete
Name: BRODSKY, MARGARET
Address: 2917 JACKSON AVE
City-St-Zip: MIAMI, FL 33133

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: GOLDSMITH, PAULINE
Address: 2907 JACKSON AVE
City-St-Zip: MIAMI, FL 33133

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: KAREN SINCLAIR DT 04/26/2009

Electronic Signature of Signing Officer or Director Date