

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004555

FILED  
Feb 25, 2009  
Secretary of State

**Entity Name:** PARCEL Q PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

15451 S.W. 13TH LANE  
SUNRISE, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1401 N UNIVERSITY DR  
STE 301  
CORAL SPRINGS, FL 33071 US

**New Mailing Address:**

**FEI Number:** 54-1977608

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, HENRY W  
C/O JOHNSON & WALTERS P.A.  
1401 N UNIVERSITY DR, STE 301  
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: O'MALLEY, TERRENCE  
Address: 15451 S.W. 13TH LANE  
City-St-Zip: SUNRISE, FL 33326

Title: TD ( ) Delete  
Name: GOLDSTEIN, MEL  
Address: 15431 S.W. 14TH LANE  
City-St-Zip: SUNRISE, FL 33326

Title: SD ( ) Delete  
Name: ERMER, CHARLES  
Address: 1329 SHOTGUN ROAD  
City-St-Zip: SUNRISE, FL 33326

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

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

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: HENRY W. JOHNSON

RA

02/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date