

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000659

FILED
Jul 06, 2009
Secretary of State

Entity Name: CENTRAL PARK CONDOMINIUM ASSOCIATION OF WINTER HAVEN, INC.

Current Principal Place of Business:

60 4TH STREET, N.W.
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

60 4TH STREET, N.W.
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 65-0295778 **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:

Name and Address of New Registered Agent:

KOLLING, CARL
60 4TH STREET, N.W.
WINTER HAVEN, FL 33881 US

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: PTD () Delete
Name: KOLLING, CARL
Address: 60 4TH STREET, N.W.
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD () Delete
Name: NIKDEL, CHRISTINE E
Address: 62 4TH ST. NW
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: KOLLING, MARY H
Address: 60 4TH STREET, N.W.
City-St-Zip: WINTER HAVEN, FL 33881

Title: D () Delete
Name: NIKDEL, SEIFOLLAH
Address: 62 4TH ST., N.W.
City-St-Zip: WINTER HAVEN, FL 33881

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: _____

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: CARL KOLLING

PRES

07/06/2009

Electronic Signature of Signing Officer or Director

Date