

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117865

Entity Name: ARDEN PARK CORP.

FILED
Feb 06, 2009
Secretary of State

Current Principal Place of Business:

5555 ANGLERS AVE., SUITE 1A
FT. LAUDERDALE, FL 33312

Current Mailing Address:

5555 ANGLERS AVE., SUITE 1A
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

18851 NE 29TH AVE
SUITE 1011
AVENTURA, FL 33180

New Mailing Address:

18851 NE 29TH AVE
SUITE 1011
AVENTURA, FL 33180

FEI Number: 20-5533342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS OF FLORIDA LLC
100 SE 2ND ST., SUITE 2900
MIAMI, FL 33131 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PIAZZA, ALBERT C
Address: 5555 ANGLERS AVENUE, STE 1A
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: NEAL, MICHAEL
Address: 5555 ANGLERS AVENUE, STE 1A
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D (X) Delete
Name: STIVELMAN, JACQUES C
Address: 5555 ANGLERS AVENUE, STE 1A
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D (X) Delete
Name: BENHAMOU, GILBERT
Address: 5555 ANGLERS AVENUE, STE 1A
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STIVELMAN, JACQUES C
Address: 18851 NE 29TH AVE SUITE 1011
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Change () Addition
Name: BENHAMOU, GILBERT
Address: 18851 NE 29TH AVE SUITE 1011
City-St-Zip: AVENTURA, FL 33180

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUES C STIVELMAN

D

02/06/2009

Electronic Signature of Signing Officer or Director

Date