Entity Name: PARKSIDE VILLAS CONDOMINIUM ASSOCIATION, INC.			Secretary of State
Current Prir	cipal Place of Business:		0741065588CC
620 N.E. 9TH A			
FT. LAUDERDA	LE, FL 33304		
Current Mai	ling Address:		
620 N.E. 9TH	H AVENUE		
FT. LAUDEF	DALE, FL 33304 US		
FEI Number	: 65-0099819		Certificate of Status Desired: Yes
Name and Address of Current Registered Agent:			
PACHECO, PAI 620 N.E. 9TH A			
#7 FT. LAUDERDALE, FL 33304 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	: PABLO PACHECO		06/30/2020
	Electronic Signature of Registered Agent		Date
Officer/Dire			
Officer/Dire Title		Title	
	ctor Detail :	Title Name	Date
Title	ctor Detail : TREASURER		Date
Title Name	ctor Detail : TREASURER PACHECO, PABLO J 620 NE 9TH AVE #7	Name	Date SECRETARY ANDERSEN, SANDRA 620 NE 9TH AVE #1
Title Name Address	ctor Detail : TREASURER PACHECO, PABLO J 620 NE 9TH AVE #7	Name Address	Date SECRETARY ANDERSEN, SANDRA 620 NE 9TH AVE #1
Title Name Address City-State-Zip:	ctor Detail : TREASURER PACHECO, PABLO J 620 NE 9TH AVE #7 FORT LAUDERDALE FL 33304	Name Address	Date SECRETARY ANDERSEN, SANDRA 620 NE 9TH AVE #1
Title Name Address City-State-Zip: Title	ctor Detail : TREASURER PACHECO, PABLO J 620 NE 9TH AVE #7 FORT LAUDERDALE FL 33304 PRESIDENT	Name Address	Date SECRETARY ANDERSEN, SANDRA 620 NE 9TH AVE #1
Title Name Address City-State-Zip: Title Name	ctor Detail : TREASURER PACHECO, PABLO J 620 NE 9TH AVE #7 FORT LAUDERDALE FL 33304 PRESIDENT BROOMFIELD, CHRISTOPHER 620 NE 9TH AVENUE #5	Name Address	Date SECRETARY ANDERSEN, SANDRA 620 NE 9TH AVE #1
Title Name Address City-State-Zip: Title Name Address	ctor Detail : TREASURER PACHECO, PABLO J 620 NE 9TH AVE #7 FORT LAUDERDALE FL 33304 PRESIDENT BROOMFIELD, CHRISTOPHER 620 NE 9TH AVENUE #5	Name Address	Date SECRETARY ANDERSEN, SANDRA 620 NE 9TH AVE #1

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24323

I hereby 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 all other like empowered.

TREASURER

SIGNATURE: PABLO PACHECO

Electronic Signature of Signing Officer/Director Detail

06/30/2020

Date

FILED Jun 30, 2020