2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#739679

FILED Jan 08, 2009 Secretary of State

Entity Name: PARKWOODS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1700 PARK MEADOWS DR. FT MYERS, FL 33907 **Current Mailing Address: New Mailing Address:** 1700 PARK MEADOWS DR. FT MYERS, FL 33907 FEI Number: 59-1891258 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CUSTER, BOB D 1724-1 PARK MEADOWS DRIVE FORT MYERS, FL 33907 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ASEC (X) Change () Addition () Delete MARGOLIN, STEVEN MARGOLIN, STEVEN Name: Name: 1717-4 PARK MEADOWS DR Address: 1717-4 PARK MEADOWS DR Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33907 Title: Title: (X) Change () Addition () Delete RUTT, DAVID L Name: SCHUTZZ, CHARLES Name: Address: 1702-PARK MEADOWS DR Address: 1712-2 PARK MEADOWS DR. City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33907 Title: SEC. () Delete Title: **ASEC** (X) Change () Addition SCBUTTZ, CHARLES ASH, MICHAEL Name: Name: 1700-4 PARK MEADOWS DR. Address: 1702-2 PARK MEADOWS DR Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: FORT MYERS, FL 33907 () Delete Title: **TRES** Title: () Change () Addition Name: RUTT, SARI Name: Address: 1702-2 PARK MEADOWS DR Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: **PRES** Title: () Delete Title: () Change () Addition CUSTER, BOB D Name: Name: 1724-1 PARK MEADOWS DR Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: Title: () Delete Title: () Change (X) Addition WEIRSMA, PENNY Name: Name: Address: Address: 15700 COUNTRY COURT FT. MYERS, FL 33912 City-St-Zip: 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: SARI F. RUTT TRES 01/08/2009