2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27305

Address:

City-St-Zip:

FILED Apr 03, 2009 Secretary of State

Entity Name: PARKWOOD ISLE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: MIAMI MGMT, INC 1145 SAWGRASS CORP PKWY SUNRISE, FL 33323 **New Mailing Address: Current Mailing Address:** MIAMI MGMT, INC 1145 SAWGRASS CORP PKWY SUNRISE, FL 33323 US FEI Number: 65-0117307 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: KATZMAN GARFINKEL, P.A. KATZMAN, GARFINKEL & ROSENBAUM, P.A. 1501 N.W. 49TH ST. 1501 N.W. 49TH ST. SUITE 202 SUITE 202 FT. LAUDERDALE, FL 33309 US FT. LAUDERDALE, FL 33309 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: LEIGH KATZMAN 04/03/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BOWEN, MIKE TRISTRAM, TONY Name: Name: 1145 SAWGRASS CORP PKWY Address: 1145 SAWGRASS CORP PKWY Address: City-St-Zip: FORT LAUDERDALE, FL 33323 City-St-Zip: FORT LAUDERDALE, FL 33323 (X) Change () Addition Title: VD () Delete Title: RAPPA, LEONARD Name: CATANIA, PATRICIA Name: Address: 1145 SAWGRASS CORP PKWY Address: 1145 SAWGRASS CORP PKWY City-St-Zip: FORT LAUDERDALE, FL 33323 City-St-Zip: FORT LAUDERDALE, FL 33323 Title: TD () Delete Title: () Change () Addition JOLIE, IDANIA Name: Name: Address: 1145 SAWGRASS CORP PKWY Address: City-St-Zip: FORT LAUDERDALE, FL 33323 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition Name: CATANIA, PATRICI Name: THOMAS, PEGGY 1145 SAWGRASS CORP PKWY Address: Address: 1145 SAWGRASS CORP PKWY City-St-Zip: SUNRISE, FL 33323 City-St-Zip: SUNRISE, FL 33323 Title: () Delete Title: () Change () Addition FISH, BARBARA Name: Name: 1145 SAWGRASS CORP PKWY Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33323 City-St-Zip: Title: (X) Delete Title: () Change () Addition THOMAS, PEGGY Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: PATRICIA CATANIA VD 04/03/2009

1145 SAWGRASS CORP PKWY

FORT LAUDERDALE, FL 33323