

FILE NOW: FILING FEE IS \$61.25

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Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N36884** (7)

1. Corporation Name

PARKWOOD ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**1950 BLUEWATER BLVD.
NICEVILLE FL 32578
US**

**1950 BLUEWATER BLVD.
NICEVILLE FL 32578
US**



2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	27 City & State	28 City & State
23 Zip	25 Country	29 Zip	30 Country

3. Date Incorporated or Qualified 03/02/1990	
4. FEI Number 59-2988008	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	
FRANCO, PAULA 1746 OSPREY COVE NICEVILLE FL 32578	

10. Name and Address of New Registered Agent	
81 Name	Farris, Ron
82 Street Address (P.O. Box Number is Not Acceptable)	1635 Parkside Circle
83 City	Niceville, FL 85 Zip Code 32578

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Ronald L. Farris* (NOTE: Registered Agent signature required when reinstating) DATE **23 Apr. 98**

12. OFFICERS AND DIRECTORS	
TITLE	PD ☐ DELETE
NAME	FRANCO, PAULA
STREET ADDRESS	1746 OSPREY COVE
CITY-ST-ZIP	NICEVILLE FL
TITLE	VD ☐ DELETE
NAME	JACOX, LARRY
STREET ADDRESS	4540 NANCY WARD LANE
CITY-ST-ZIP	NICEVILLE FL
TITLE	SD ☐ DELETE
NAME	WATSON, LINDA
STREET ADDRESS	1703 CRESTONE COVE
CITY-ST-ZIP	NICEVILLE FL
TITLE	TD ☐ DELETE
NAME	FARRIS, RON
STREET ADDRESS	1635 PARKSIDE CIRCLE
CITY-ST-ZIP	NICEVILLE FL
TITLE	D ☒ DELETE
NAME	WYZGOWSKI, TOM
STREET ADDRESS	1008A HWY 98 #122
CITY-ST-ZIP	NICEVILLE FL
TITLE	D ☐ DELETE
NAME	WILKES, JIMMY L
STREET ADDRESS	1743 BOLTON VILLAGE LANE
CITY-ST-ZIP	NICEVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	V ☒ Change ☐ Addition
1.2 NAME	Franco, Paula
1.3 STREET ADDRESS	1746 Osprey Cove
1.4 CITY-ST-ZIP	Niceville, FL 32578
2.1 TITLE	D ☒ Change ☐ Addition
2.2 NAME	Jacox, Larry
2.3 STREET ADDRESS	4540 Nancy Ward Lane
2.4 CITY-ST-ZIP	Niceville, FL 32578
3.1 TITLE	ST ☒ Change ☐ Addition
3.2 NAME	Watson, Linda
3.3 STREET ADDRESS	1703 Crestone
3.4 CITY-ST-ZIP	Niceville, FL 32578
4.1 TITLE	P ☒ Change ☐ Addition
4.2 NAME	Farris, Ron
4.3 STREET ADDRESS	1635 Parkside Circle
4.4 CITY-ST-ZIP	Niceville, FL 32578
5.1 TITLE	D ☐ Change ☒ Addition
5.2 NAME	Robert Menard
5.3 STREET ADDRESS	4560 Castlewood Lane
5.4 CITY-ST-ZIP	Niceville, FL 32578
6.1 TITLE	D ☐ Change ☒ Addition
6.2 NAME	Bruce Pettibone
6.3 STREET ADDRESS	4575 Castlewood Lane
6.4 CITY-ST-ZIP	Niceville, FL 32578

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ronald L. Farris* 23 Apr. 98

CR2E037 (10/97)